

ACCP PRN Report

American College of Clinical Pharmacy

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PRESIDENT'S COLUMN

Lawrence J. Cohen,
Pharm.D., FCCP, BCPP

Helping Students Emerge as Professionals

Recently at my home institution, Washington State University, I was asked to meet with a group of students to discuss why I feel so strongly that they should continue their education and training by completing a residency. I shared some recent data that showed the growing gap between the number of residency applicants and the number of available residency positions.

In addition, I shared information regarding ACCP's new "Emerge from the Crowd: How to Become a Standout Residency Candidate" program being offered in Reno for the first time this month. Through this program, we are reaching out to first-, second-, and third-year students with an interest in postgraduate training to demonstrate how they can stand out from the crowd when they eventually apply for residencies. My students shared with me stories about some of their friends who graduated last year, applied for residency positions but did not match, and subsequently had difficulty finding jobs while waiting to reapply for residencies this year.

Having served as the hiring authority in several of my past positions, I felt—and still feel (as do many of you, I'm sure)—that residency training is essential for those working in direct patient care. However, not all pharmacy graduates are created equal. Some graduates are better prepared and therefore make more competitive residency applicants. This is especially true of those who recognize early in pharmacy school the need to



complete a residency and take proactive steps in years 1, 2, and 3 to assemble a "body of work" and experience that will enhance their chances of securing a residency position.

In my previous leadership roles, I often used residency training and board certification as suggestive evidence that a "new hire" would be able (with minimal orientation) to "hit the ground running" on day 1. Of course, like pharmacy graduates, not all residency programs are created equal; hence, the completion of residency training doesn't necessarily ensure that one is fully prepared to provide direct patient care. Nor does board certification guarantee that a clinician will perform exceptionally well. However, credentials such as these are currently the best proxy measures of competence available to us.

So, why bring this up now? For a very long time, there has been a need to more clearly articulate and justify the activities of clinical pharmacy practitioners. Regardless of what shape health care reform eventually takes, it's now readily apparent that health care providers will be increasingly accountable for the outcomes of their services.

It also appears to me that it will be increasingly important for graduates to have additional patient care skills and experience—attributes that postgraduate training is designed to achieve for those clinical pharmacists who wish to practice in direct patient care settings. Simply stated, an academic degree and state license alone aren't adequate in today's health care environment to credibly demonstrate that one possesses the skills necessary to provide direct patient care.

With this in mind and consistent with critical issue 2 of the ACCP Strategic Plan, I charged the Certification Affairs Committee to develop a set of "ACCP guidelines" articulating the desired

professional developmental pathways for clinical pharmacists to follow (e.g., postgraduate training, certification, recertification, or other mechanisms to demonstrate competence). I also charged the Public and Professional Relations Committee to answer the question, “Should organized clinical pharmacy promote a consistent, standardized process of patient care provided by clinical pharmacists that could apply to any clinical practice setting?”

In today’s health care environment, where justification based on demonstrated improvement in treatment outcomes is increasingly becoming the norm, we must be able to provide a reliable and consistent set of clinical services on which both patients and our health care professional colleagues can depend. I will address this topic in more detail in future columns of the ACCP Report.

I believe it is important at this time for PRN members to recognize the vital significance of their role to ACCP, particularly to our student members. Indeed, I can think of no better group than PRN members to explain to students the benefits of postgraduate training and active engagement in professional societies like ACCP.

As a student—no matter how many years since you graduated with your pharmacy degree—do you remember how intimidated you felt at your first professional meetings? Walking into your first ACCP Annual Meeting session where many of the attendees were well-known authors of the textbooks you were required to read was unnerving, to say the least! With this observation in mind, I’ve asked the StuNet Advisory Committee to help us identify ways to enhance learning opportunities and other activities for students at our meetings.

One obvious way to address this issue is to make attendance at PRN functions open, friendly, and inviting for students. During and after the ACCP Annual Meeting in Pittsburgh last fall, I heard from several students who wished they had known more about the PRNs before planning their various meeting activities. Many of the students are just starting to be aware of all the PRN interest areas and how the PRNs can contribute to their professional growth and appreciation of the clinical pharmacy discipline.

Finally, I would like to personally recognize our PRN officers for their efforts in working with ACCP leaders and staff as we continue to pursue additional specialties through the Board of Pharmacy Specialties (BPS). Although the process is long and sometimes cumbersome, ACCP continues its advocacy for the expansion of recognized pharmacy

specialties. As most of you know, BPS has completed role delineation studies of pharmacists practicing in critical care, pain and palliative care, and pediatrics—and we anticipate that BPS will soon issue a call for petitions in support of these potential new specialties. In addition, BPS recently announced that it is moving forward in 2012 to consider the recognition of cardiology and infectious disease as specialties (see http://www.bpsweb.org/news/pr_040212.cfm), and we are optimistic that BPS will consider organ transplantation in 2013.

In closing, I would like to express my thanks to our PRNs for all that you do for ACCP. Collectively, our PRN members represent a very broad and diverse base of knowledge and expertise that help make ACCP a unique and successful organization. As always, please feel free to contact me at any time. Remember, your creativity, perspective, and knowledge help to keep ACCP on the cutting edge of our discipline.



PRNs PREPARE FOR ELECTIONS

PRNs to Hold Elections

The PRN election cycle is upon us. It is time for the PRNs to begin the process of determining who will serve as officers in the coming year. If you are interested in being a PRN officer or in nominating someone, please contact your PRN’s chair.

Election Process

The Nominations Committee will consist of at least two individuals appointed by the PRN chair. These individuals may be the PRN’s current elected officers. Those who are on a PRN’s nominations committee will be ineligible to run for office in that PRN’s election that year.

The Nominations Committee should prepare a slate of candidates and shall provide information to each candidate relative to the election procedures; the Nominations Committee shall also provide a timeline and a list of expected duties. When possible, two or three candidates for each office shall be up for election. If only one candidate can be identified, an election will still be held, with voters given the option of identifying a write-in candidate. When there are more than three possible candidates, the PRN’s Nominations Committee will be responsible for narrowing the slate to three candidates. The Nominations Committee will obtain a brief (250 words) biographical sketch or candidate statement from the candidate.

Voting

As in previous years, PRN elections will be held online. PRN members will receive an e-mail from ACCP that outlines the voting procedure. Members will use their login and password to access the ACCP Web site. Each member will then be able to access the ballot for each PRN of which he or she is a current member. Members should review their e-mail and the ACCP Web site for further news about online voting as the election draws closer.

Election Timetable

PRN call for nominations	March 2012
Submission of slates and candidate biographies to ACCP	June 15, 2012
Electronic balloting opens	July 13, 2012
Electronic balloting closes	August 20, 2012 (6–8 weeks before the Annual Meeting)
Nominations Committee contact notified of results	August 27, 2012
Nominations Committee notifies all candidates of election results	August 29, 2012 (within 10 days of election)
ACCP staff notifies new officers of PRN Officers Meeting date and time at the Annual Meeting	September 2012
PRN Handbook made available electronically to each new officer	October 2012

SAVE THE DATE FOR THE 2012 ACCP VIRTUAL POSTER SYMPOSIUM



Mark your calendar for the first ACCP Virtual Poster Symposium to be held May 22–24, 2012. Posters will be on display May 22–24 for asynchronous viewing and

comment. In addition, three interactive sessions will be scheduled from 7:00 p.m. to 9:00 p.m. (EDT) on May 22, 23, and 24. During these three interactive sessions, authors will be available for real-time online question-and-answer sessions alongside their virtual posters. The technology required for attendees is minimal – a broadband Internet connection, a current browser, and Skype (free software).

Posters will be presented in the Original Research, Clinical Pharmacy Forum, and Resident and Fellow Research-in-Progress categories, with about 30–35 posters presented each evening. Take advantage of this opportunity to network with your colleagues and learn more about what ACCP members and nonmembers are doing in their practice site, from the comfort of your home or office. No travel is required. Registration for this symposium is free to all ACCP members and is available at www.accp.com/myaccount.

PHARMACOTHERAPY AND AMBULATORY CARE PHARMACY RECERTIFICATION REQUIREMENTS

BPS-Approved Professional Development Program for BCACP Recertification

The Board of Pharmacy Specialties (BPS) has approved a three-component professional development program to be developed and delivered by the American College of Clinical Pharmacy for the recertification of Board Certified Ambulatory Care Pharmacists (BCACPs).

The three components will provide BCACPs who elect to recertify by continuing education with opportunities to earn more than the 100 hours of continuing pharmacy education (CPE) credit required during a 7-year period. The three components, available annually, are as follows:

1. Ambulatory Care Self-Assessment Program (ACSAP)
2. Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review and Recertification Course
3. From Theory to Practice: Clinical Reasoning Series in Ambulatory Care Pharmacy

Collectively, the three components cover the domains, tasks, and knowledge statements within the Ambulatory Care Pharmacy specialty as delineated by the BPS Specialty Council on Ambulatory Care Pharmacy. BCACPs may select from among these annual components to earn the required number of hours during their certification cycle. Each component includes a Web-based posttest.

Component 1: Ambulatory Care Self-Assessment Program (ACSAP)

ACSAP is an online book series that provides BCACPs with previously unpublished material on contemporary topics related to the Ambulatory Care Pharmacy specialty. ACSAP online books (available as PDFs) will be released twice a year starting in January 2013.

ACSAP will provide a minimum of 20 recertification hours annually. BCACPs who wish to earn recertification credit must read the instructional materials and successfully complete the Web-based posttest by the deadline for each ACSAP module. Only completed tests are eligible for credit; no partial or incomplete tests will be processed.

Note: BCACPs may use as many ACSAP modules as they need to attain the required CPE credits during their 7-year certification cycle.

2013 ACSAP Availability: The first ACSAP book will be released in January 2013. The full schedule of ACSAP books – with release dates – will be posted at www.accp.com in fall 2012. Tables of contents, learning objectives, sample chapters, faculty, posttest submission deadlines, and available CPE will be updated as this information becomes available for each book.

Component 2: Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review and Recertification Course

The Ambulatory Care Pharmacy Preparatory Review and Recertification Course will be offered live each spring and will be available for home study in various formats, including an online program and a workbook and CD-ROM package. Home study materials will be released around June 1 each year after the live offering.

A minimum of 20.0 hours of recertification credit will be available for participants each year. To earn recertification credit, BCACPs must either attend the live program or complete the instructional materials for home study and successfully complete the Web-based posttest by the deadline. Only completed tests will be eligible for credit; no partial or incomplete tests will be processed.

Note: The Ambulatory Care Pharmacy Preparatory Review and Recertification Course may be completed for recertification credit, either in live or home study format, up to two times, in nonconsecutive years, during the 7-year certification cycle.

2012 Course Availability: 2012 Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review and Recertification Course will be held from April 27 to May 1, 2012, in Reno, Nevada. The home study version of the course will be available beginning on June 1, 2012, both as an online/Web-based version and as a CD-ROM and workbook package. Both the live and home study formats of the course include access to a Web-based posttest. BCACPs who take the course and successfully complete the posttest will earn 26.5 hours of recertification credit. The Web-based posttest must be submitted by September 1, 2012, to be eligible for recertification credit.

For more information on Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review and Recertification Course, [click here](#).

Component 3: From Theory to Practice: Clinical Reasoning Series in Ambulatory Care Pharmacy

The Clinical Reasoning Series in Ambulatory Care Pharmacy is a live education series that explores cutting-edge, contemporary therapeutic topics. The program employs active learning exercises designed to advance the skills and abilities of BCACPs to critically evaluate scientific evidence and clinical trials and effectively incorporate significant findings into daily practice. This program will be presented live each year in conjunction with the ACCP Annual Meeting.

A minimum of 6.0 hours of recertification credit will be available for participants each year. To earn recertification credit for the Clinical Reasoning Series, BCACPs will be required to attend the live program and successfully complete the Web-based posttest. Only completed tests are eligible for credit; no partial or incomplete tests will be processed.

Note: BCACPs may participate in the Clinical Reasoning Series in Ambulatory Care Pharmacy as many times as they wish throughout their 7-year certification cycle to attain the required recertification credit.

2012 Program Availability: The first Clinical Reasoning Series in Ambulatory Care Pharmacy will be held on Saturday, October 20, in conjunction with the 2012 ACCP Annual Meeting in Hollywood, Florida. To be eligible for recertification credit, BCACPs must attend the

live program and successfully complete the Web-based posttest by November 30, 2012.

The Clinical Reasoning Series program agenda, learning objectives, faculty, and registration details will be available in July 2012 at www.accp.com.

BCACP Professional Development Program Schedule

The new BPS-approved professional development program has been designed to provide BCACPs substantially more than the required 100 hours of CPE credit during a 7-year period. Each of the three program components will provide recertification credit annually. BCACPs may select from among these components to earn the required number of hours during their certification cycle.

The table that follows summarizes the minimum recertification credit hours offered, per year, by each program component beginning in April 2012 and continuing through 2018. In total, the program will offer a minimum of 302 credit hours toward BCACP recertification. Of these 302 hours, a minimum of 202 will be available to individual BCACPs. *(Factored into the total minimum eligible hours is a limitation on the use of the Ambulatory Care Pharmacy Preparatory Review and Recertification Course, which may be used no more than twice and not in 2 consecutive years.)*

Please note that although this program affords BCACPs who elect to recertify by continuing education options to earn the

required 100 recertification hours, BPS will only accept no more than 50 hours of recertification credit earned during the first 3 years of the 7-year certification cycle. For more information on BPS requirements, [click here](#).

BPS-Approved Professional Development Program for Pharmacotherapy Recertification

The new BPS-approved professional development program has been designed to provide BCPSs substantially more than the required 120 hours of continuing education credit during a 7-year period. Each of the three program components will provide recertification credit annually. BCPSs may select from among these components to earn the required number of hours during their recertification cycle. Until 2010, the *Pharmacotherapy Self-Assessment Program (PSAP)* was the only BPS-approved professional development program for pharmacotherapy specialty recertification; in 2011, two new program components were designed to complement PSAP and provide an additional dimension to the recertification process. The three components are as follows:

1. *Pharmacotherapy Self-Assessment Program, Seventh Edition (PSAP-VII)*;
2. Updates in Therapeutics®: The Pharmacotherapy Preparatory Review and Recertification Course; and
3. From Theory to Bedside: Clinical Reasoning Series.

Program Component				
Year	ACSAP	Ambulatory Care Pharmacy Preparatory Review and Recertification Course	Clinical Reasoning Series	Total Credit Hours Available (minimum)
2012	N/A	20	6	26
2013	20	20	6	46
2014	20	20	6	46
2015	20	20	6	46
2016	20	20	6	46
2017	20	20	6	46
2018	20	20	6	46
Minimum Credit Hours Available Between 2012 and 2018	120	140	42	302
Minimum Eligible Credit Hours Available Between 2012 and 2018	120 (at least 20 hours annually 2013–2018)	40 (at least 20 hours annually; may be completed up to two times, in nonconsecutive years, during 7-year certification period)	42 (at least 6 hours annually 2012–2018)	202

N/A = not available.

Collectively, the three components cover the domains, tasks, and knowledge statements within the Pharmacotherapy specialty as delineated by the BPS Specialty Council on Pharmacotherapy. Each component will be available annually. BCPSs may select from among these components to earn the required number of hours during their recertification cycle. Each component includes a Web-based posttest. A description of each program component follows.

Component 1: Pharmacotherapy Self-Assessment Program, Seventh Edition (PSAP-VII)

The *Pharmacotherapy Self-Assessment Program* is an 11-book home study program that provides pharmacotherapy specialists with previously unpublished material on contemporary topics related to pharmacotherapy. PSAP books, available both in print and in an online format as PDFs, are released quarterly. The seventh edition of PSAP began with the release of *Cardiology* in January 2010. The final book in the series, *Gastroenterology and Nutrition*, will be released in July 2012.

According to subject matter, PSAP books are subdivided into modules, each of which is available for recertification credit. PSAP-VII provides a minimum of 40.0 hours of recertification credit each year and 120.0 hours of recertification credit during the 3-year life of the edition. BCPSs who wish to earn recertification credit using PSAP modules or books must read the instructional materials and successfully complete the Web-based posttest by the predetermined deadline for each module or book. Only completed tests are eligible for credit; no partial or incomplete tests will be processed.

Note: BCPSs may use PSAP to earn as many recertification hours as they need to attain the required hours during their 7-year recertification cycle.

For the full schedule of books with release dates, tables of contents, learning objectives, sample chapters, faculty, deadlines for submitting online posttests, and recertification credit hours for each module as they become available, [click here](#).

Component 2: Updates in Therapeutics®: The Pharmacotherapy Preparatory Review and Recertification Course

The Pharmacotherapy Preparatory Review and Recertification Course will be offered live each spring and will be available for home study in various formats including an online program and a workbook and CD-ROM package product. Home study materials will be released on or around June 1 each year after the live offering.

A minimum of 21.0 hours of recertification credit will be available for participants each year. To earn recertification credit for the Pharmacotherapy Preparatory Review and Recertification Course, BCPSs must attend the live program or complete the instructional materials for home study and successfully complete the Web-based posttest for the program. Only completed tests will be eligible for credit; no partial or incomplete tests will be processed.

Note: The Pharmacotherapy Preparatory Review and Recertification Course may be completed for recertification credit, either in live or home study format, up to two times, in nonconsecutive years, during the 7-year recertification cycle.

2012 Course Availability

ACCP's 2012 Updates in Therapeutics® meeting will be held from April 27 to May 1, 2012, in Reno, Nevada. The home study version of the course will be available beginning on June 1, 2012, both as an online/Web-based version and as a CD-ROM and workbook package. Both the live and home study formats of the course include access to a Web-based posttest. BCACPs who take the course and successfully complete the posttest will earn 24.0 hours of recertification credit. The Web-based posttest must be submitted by September 1, 2012, to be eligible for recertification credit.

For more information on Updates in Therapeutics®: The Pharmacotherapy Preparatory Review and Recertification Course, click [here](#).

Component 3: From Theory to Bedside: Clinical Reasoning Series in Pharmacotherapy

The Clinical Reasoning Series will be a live education series that explores cutting-edge, contemporary therapeutic topics. The program will employ active learning exercises designed to

advance the skills and abilities of BCPSs to critically evaluate scientific evidence and clinical trials and effectively incorporate significant findings. The program will be presented live each year in conjunction with the ACCP Annual Meeting.

A minimum of 6.0 hours of recertification credit will be available for participants each year. To earn recertification credit for the Clinical Reasoning Series, BCPSs will be required to attend the live program and successfully complete the Web-based posttest for the program. Only completed tests are eligible for credit; no partial or incomplete tests will be processed.

Note: BCPSs may participate in the Clinical Reasoning Series every year throughout their 7-year recertification cycle to attain the required recertification credit.

2012 Program Availability

The 2012 program of the From Theory to Bedside: Clinical Reasoning Series will be held in conjunction with the 2012 ACCP Annual Meeting in Hollywood, Florida. To be eligible for recertification credit, BCPSs will be required to attend the live program and successfully complete the Web-based posttest.

Please check the Web site this August for updated programming information.

BCPS Professional Development Program Schedule

The table that follows summarizes the recertification credit hours offered, per year, beginning in January 2010 (which marked the release of the first book in the 11-book PSAP-VII series) and continuing through 2016. In total, the program will offer a minimum of 382 contact hours toward BCPS recertification. Of these 382 hours, a minimum of 298 will be available to individual BCPSs. *(Factored into the total minimum eligible hours is a limitation on the use of the Pharmacotherapy Preparatory Review and Recertification Course, which may be used no more than twice and not in 2 consecutive years.)*

Please note that although this program offers additional options to recertify by continuing education, BPS recertification still requires that BCPSs earn 120 hours of credit and that no more than 60 hours may be earned before the end of the fourth year of certification. However, all 120 hours may be earned during the fifth through seventh years of certification. For more information on BPS requirements, [click here](#).

Program Component				
Year	PSAP Series	Pharmacotherapy Preparatory Review and Recertification Course	Clinical Reasoning Series	Total Contact Hours Available (minimum)
2010	40 (PSAP-VII)	Not available	Not available	40
2011	40	21	6	67
2012	40	21	6	67
2013	40 (PSAP-VIII)	21	6	67
2014	40	21	6	67
2015	40	21	6	67
2016	40 (PSAP-IX)	21	6	67
Minimum Contact Hours Available Between 2010 and 2016	280	126	36	442
Minimum Eligible Contact Hours Between 2010 and 2016	280 (40 hours annually 2010–2016)	42 (at least 21 hours annually; may be completed up to two times, in nonconsecutive years, during 7-year recertification period)	36 (at least 6 hours annually during the period)	358

PRN E-MAIL LIST ETIQUETTE

When using the PRN e-mail lists, please take care to be respectful of your fellow colleagues and observe the following procedures.

E-mail List Etiquette and Procedures:

1. Include a signature on all messages. The signature should include your name, affiliation, location, and e-mail address.
2. Clearly articulate in communications whether the information being provided represents factual information/data or is a professional or personal opinion.
3. Recognize, and be sensitive to the fact, that use of the e-mail list is a “public” activity subject to the subpoena power of law enforcement authorities, like most other forms of communication. There should be no expectation of privacy in e-mail list communications.
4. It is recommended that you send all of your messages to an e-mail list in plain text format as opposed to rich text or HTML.
5. When you receive a message directed to the list, selecting the Reply button in your e-mail program will send the response to the author of the message. Selecting the Reply All button in your e-mail program will send your response to the original author as well as the entire list. Always double-check the name or address you are replying to when responding to a message transmitted by an e-mail list.
6. If you receive an unwanted message from a list member who does not observe these rules, please do not respond to the list. Instead, ignore the message or, if you feel the need to respond to the sender, make certain you reply only to the sender.
7. If you plan to use an automatic e-mail response to indicate that you are out of the office, please remember to set your subscription type to NO-MAIL until you return.

Prohibited Communications:

The following types of communications must be rigorously avoided on all PRN e-mail lists because of their actual or perceived violation of federal laws related to restraint of trade and/or anti-competitive practices:

1. Comments, recommendations, questions, or answers concerning the establishment or amounts of specific prices, charges, or costs for products and/or services, sharing of fee structures, or financial information that could suggest pos-

sible price collusion between competitors (e.g., competing clinicians or institutions).

2. Recommendations that favor or disfavor a particular vendor or service provider based on the price of those services (e.g., directly or indirectly recommending a “boycott” of a product or service based on price).
3. Opinions that stray toward or may suggest prohibited activities cited above.

For more information on using the PRN e-mail lists, please click [here](#).



PRN NETWORKING BREAKFASTS RETURN TO RENO, NEVADA

ACCP’s PRNs provide a focal point for clinical pharmacists with common interests and needs in practice, research, and education. PRN members help ACCP develop educational programs and promote the activities of the PRNs.

After their successful debut in Columbus, Ohio, last year, the popular ACCP PRN networking breakfasts will continue at the 2012 Updates in Therapeutics® in Reno, Nevada.

Join ACCP and your fellow meeting attendees for a complimentary continental breakfast each day, Saturday through Monday, from 7:30 a.m. to 9:00 a.m. (PDT) in the Tuscany ballrooms of the Peppermill Resort. Many PRNs will have a designated table where attendees can meet PRN representatives and learn how to become involved. A listing of the PRNs who will be hosting tables during each breakfast session follows.

Saturday, April 28

7:30 a.m.–9:00 a.m. (PDT)

- CNS PRN
- Drug Information PRN
- Geriatrics PRN
- Pediatrics PRN
- Women’s Health PRN

Sunday, April 29

7:30 a.m.–9:00 a.m. (PDT)

- Adult Medicine PRN
- Ambulatory Care PRN
- Emergency Medicine PRN
- Nephrology PRN

Monday, April 30

7:30 a.m.–9:00 a.m. (PDT)

- Ambulatory Care
- Cardiology
- Clinical Administration
- Education and Training



PRN NEWS BRIEFS

Adult Medicine PRN

The Adult Medicine PRN has been actively planning two focus sessions for the ACCP Annual Meeting. Our PRN membership was polled last year for suggested educational session topics. Based on the results, the PRN has been coordinating with the Infectious Diseases PRN to offer an update on HIV topics for the general practitioner. The PRN is also planning another focus session for the ACCP Annual Meeting, tentatively an update of chronic obstructive pulmonary disorder management.

The Travel and Training and Nominations committees continue to work on new awards to recognize our PRN members. Stay tuned for announcements regarding these awards.

Promotions:

Lamis Karaoui, Pharm.D., BCPS, was appointed director of experiential education – Department of Pharmacy Practice, School of Pharmacy, Lebanese American University, Byblos, Lebanon.

Posters:

Lamis Karaoui, Pharm.D., BCPS, presented a poster titled “Efficacy and Safety of Enoxaparin 20 mg Subcutaneously in Patients with Chronic Kidney Disease Stages 4 and 5 for Deep Vein Thrombosis” at the 2012 SCCM (Society of Critical Care Medicine) Congress.

Lamis Karaoui, Pharm.D., BCPS, presented a poster titled “Evaluation of Diabetes Awareness Among Patients with Diabetes Mellitus Within Lebanese Community Pharmacy Practice Settings” at the 2011 ASHP Midyear Clinical Meeting & Exhibition.

Other notable achievements:

Adrienne Carey, clinical pharmacist at Freeman Health System, is now BCPS certified.

Ambulatory Care PRN

The Ambulatory Care PRN continues to thrive, with more than 1300 members. Some notable achievements of individuals from the Ambulatory Care membership during the past year are as follows.

Awards:

Sarah Westberg recently received the Young Alumni Achievement Award from Drake University College of Pharmacy and Health Sciences.

Stephanie Nigro and Christina Madison were both recipients of APhA’s 2012 One to One Counseling Recognition Award.

Kathryn Hurren received the Pharmacist of the Year Award from the Southeastern Michigan Society of Health-System Pharmacists.

Debra Wobbleton Kemp was awarded the 2011 North Carolina Distinguished Young Pharmacist Award.

Grants:

Stephanie Nigro received a \$1000 APhA foundation grant for a project titled “Impact of Pharmacist-Generated Asthma Action Plans to Improve Asthma Control in an FQHC.”

Emily McCoy was a coadvisor for a student-developed MTM program at an indigent patient pharmacy (Ozanam Charitable Pharmacy) that received a \$7000 award from Target, and she received a grant from the Alabama Asthma Program together with a colleague, Allison Chung, to develop a hands-on skills-based asthma program for local practitioners.

Publications:

Tzefos M, Harris K, Brackett A. Clinical efficacy and safety of once-weekly glucagon-like peptide-1 agonists in development for treatment of type 2 diabetes mellitus in adults. *Ann Pharmacother* 2012;46:68–78.

Tzefos M, Olin J. 3-hydroxyl-3-methylglutaryl coenzyme A reductase inhibitor use in chronic liver disease: a therapeutic controversy. *J Clin Lipidol* 2011;5:450–9.

Brice K, **Tzefos M**. The clinical efficacy and safety of glucagon-like peptide-1 (GLP-1) agonists in

adults with type 2 diabetes mellitus. *Clin Med Insights Endocrinol Diab* 2011;4:13–24.

Colon-Emeric C, **O'Connell MB**, Haney E. Osteoporosis piece of multi-morbidity puzzle in geriatric care. *Mt Sinai J Med* 2011;78:515–26.

Benge C, **Markley B, McFarland M**. Role of aggressive LDL reduction in patients with coronary heart disease. *South Med J* 2012;105:48–55.

McFarland M, Markley B, Zhang P, Hudson J. Evaluation of modification of diet in renal disease study and Cockcroft-Gault equations for sitagliptin dosing. *J Nephrol* 2011 Sep 7:0. doi:10.5301/jn.5000026.

Riddle S. Taking CDS to the next level for medication management. *Patient Saf Qual Healthc* 2012;9:14–6.

Nigro S and Smith M cowrote a PSAP chapter titled “The Patient-Centered Medical Home” (Book 8 in October 2011).

Ward L, **Patel NM**, Hanlon A, Eldakar-Hein S, Sherlinski K, Ward SH. Prescription medication borrowing among adult patients at an urban medical center. *J Urban Health* 2011;88:997–1014.

Makowski CT, Gwinn KM, **Hurren KM**. Naltrexone/bupropion: an investigational combination for weight loss and maintenance. *Obes Facts Eur J Obes* 2011;4:489–94.

Hurren KM, Berlie HN. Lorcaserin: an investigational serotonin 2C agonist for weight loss. *Am J Health Syst Pharm* 2011;68:2029–37.

Pinelli NR, **Hurren KM**. Efficacy and safety of long-acting glucagon-like peptide-1 receptor agonists compared to exenatide twice daily and sitagliptin in type 2 diabetes mellitus: a systematic review and meta-analysis. *Ann Pharmacother* 2011;45:850–60.

Mary Ann Kliethermes and Tim Brown are coeditors of a new ASHP book titled *Building a Successful Ambulatory Practice: A Complete Guide for Pharmacists*, and many of our members are authors of various chapters:

Chapter 1: Defining the Ambulatory Patient Care Model; Edward P. Sheridan, Jeannie Kim Lee

Chapter 2: Planning and Steps to Building the Ambulatory Practice Model; Steven M. Riddle, Jeffrey M. Brewer

Chapter 3: Developing a Business Plan for an Ambulatory Practice; Kelly Epplen, Paul W. Bush

Chapter 4: Marketing Your Ambulatory Practice; Mary Ann Kliethermes, Tim R. Brown, Tara L. Jenkins, Kevin Charles Farmer

Chapter 5: Creating the Ambulatory Patient Care Model; Gloria P. Sachdev, Michelle L. Cudnik

Chapter 6: Communication and Documentation for an Ambulatory Practice; Seena L. Haines, Tim R. Brown

Chapter 7: Quality Assurance for Ambulatory Patient Care; Mary Ann Kliethermes

Chapter 8: Reimbursement for the Pharmacist in an Ambulatory Practice; Sandra Leal, Betsy Bryant Shilliday, Amy L. Stump

Chapter 9: Maximizing Your Ambulatory Practice: Planning for the Future; Stuart T. Haines, Jill S. Borchert

Bourg CA, Phillips BB. Rosiglitazone, myocardial ischemic risk, and recent regulatory actions. *Ann Pharmacother* 2012;46:282–90.

Goldman-Levine J. Beyond metformin: initiating combination therapy in patients with type 2 diabetes mellitus. *Pharmacotherapy* 2011;31(12 pt 2):44S–53S.

Kiser K, Jonas D, Warner Z, Scanlon K, Bryant Shilliday B, Dewalt D. A randomized controlled trial of a literacy-sensitive self-management intervention for chronic obstructive pulmonary disease patients. *J Gen Intern Med* 2011;27:190–5.

McBane S, Trewet CB, Nadra Havican S, **Kiser K**, Klingel C, Riche DM, Sease JM, Nau DP, Zillich AJ. Tenets for developing quality measures for ambulatory clinical pharmacy services. *Pharmacotherapy* 2011;31:115e–134e.

Klug C, Bonin K, **Bultemeier N**, Rozenfeld Y, Vasquez RS, Johnson M, Cherry JC. Integrating telehealth technology into a clinical pharmacy telephonic diabetes management program. *J Diabetes Sci Technol* 2011;5:1238–45.

Specialty Boards and Certifications:

Fall 2011 was the first year the Board of Pharmacy Specialties offered specialty certification in Ambulatory Care. *Of the 518 pharmacists who passed the examination, more than 50% were members of the Ambulatory Care PRN!* See the February 2012 issue of *ACCP Report* for a list of those members.

Maria Tzefos recently obtained her CDE.

Melody Hartzler recently became a certified asthma educator (AE-C).

Stephanie Nigro obtained her BC-ADM (Board Certified Advanced Diabetes Management).

Other Notable Achievements:

Henry Bussey retired from the University of Texas in August 2011 and is continuing his efforts in the development of ClotCare.org, the ClotFree system for online automated remote monitoring and management of anticoagulation, and in the development of the Genesis Clinical Research Center.

Coralynn B. Trewet now sits on the NHLBI National Program to Reduce Cardiovascular Risk (NPRCR) Coordinating Committee. She is a representative for APhA and the only pharmacy representative on the committee.

Kelly Rudd has been chosen to serve on the Community Advisory Panel of ACCP's Research Institute. She also became a member of the New York Anticoagulation Coalition and the Medicare Quality Improvement organization for New York State (IPRO). She also presented a poster at The International Rural Nursing and Rural Health Conference titled "Interdisciplinary Safety and Outcomes in the Rural Setting."

Candice Lagasse was recently accepted into CMS's Innovation Advisors Program. She is one of 73 individuals from 27 states and the only pharmacist selected.

Christina Madison was elected as president-elect of the Nevada Public Health Association.

Robin Koffarnus was named as the director of pharmacy services at the Montgomery Family Medicine Residency Program in Montgomery, Alabama.

Jennifer Goldman-Levine provided a talk at the recent 2011 ASHP Midyear Clinical Meeting & Exhibition titled "Creative Techniques to Engage Your Audience in Active Learning."

Katie Kiser is the current president of the local chapter of ACCP – The District of Columbia College of Clinical Pharmacy.

Cardiology PRN

The Cardiology PRN is pleased to report on several ongoing and new initiatives this year:

- Congratulations to **Sheryl Chow** and **Robert Page** for their continued success with collaborative programming with the American Heart Association for the Scientific Sessions 2012 meeting in November 2012! This year, two program proposals were accepted, including the second annual pharmacist-focused session titled "Prevention and Management of Drug-Induced Cardiovascular Diseases," developed by the Cardiology PRN and AHA Clinical Pharmacology Committee.
- The Cardiology PRN Programming Committee is excited to announce two collaborative programs with the American Society of Hypertension: one at the 2012 ACCP Annual Meeting and the other at the American Society of Hypertension 2013 Annual Scientific Meeting.
- The Awards and Recognition Committee is soliciting nominations for the Distinguished Investigator Award, Service Award, Clinical Practice Award, and Paper of the Year. Please contact committee cochairs **Zachary Stacy** and **Rob DiDomenico** with nominations.
- A Key Papers bibliography paper on management of stroke is in preparation jointly with the Central Nervous System PRN (Chair: **Bill Baker**).
- A Key Papers bibliography paper on cardiac surgery is in preparation (Chair: **Ian Hollis**).
- The Cardiology PRN Fundraising Committee is planning a social reception for all ACCP members at the 2012 ACCP Annual Meeting. Details to follow! (Chair: **Douglas Jennings**)

Individual Member Accomplishments:

- **Judy Cheng** received the 2011 Research Mentor Award-Summer Undergraduate Research Fellowship Program awarded by Massachusetts College of Pharmacy and Health Sciences.

- **Christina Glasgow** received her BCPS credentials and was accepted into the 2012 ASHP Pharmacy Leadership Institute Program.
 - **Donald W. Graff** received a Level II Scientific and Technical Achievement Award for 2010 for his contributions to a body of work evaluating the cardiovascular effects of air pollution particulate matter. This honor was awarded in October 2011.
 - **Julie Bartell** received BCACP credentials.
 - **Dave L. Dixon** is now assistant professor, Department of Pharmacotherapy and Outcomes Science at Virginia Commonwealth University School of Pharmacy.
 - **Pat Howard** received the Rho Chi 2011 Award for Teaching Excellence, Alpha Rho Chapter University of Kansas School of Pharmacy.
 - The Cleveland VA Medical Center and the SERIOUS Heart Failure Medication Reconciliation Clinic – run by **Sherry LaForest**, Adam Pugacz, and Julie Gee, NP – were awarded one of the ISMP Cheers awards for medication safety in December 2011 for their postdischarge follow-up clinic and their ability to identify and correct medication errors with this system.
 - **Craig R. Lee** was awarded the 2011 Junior Investigator Award by the Cardiology PRN, and was named an ACCP Fellow.
 - **Jo Ellen Rodgers** has been elected as a distinguished practitioner and fellow in the National Academies of Practice in the Pharmacy Academy. The National Academies of Practice is composed of 10 academies representing various areas of health care practice. Founded in 1981, the NAP's central purpose is to advise public policy-makers on health care issues. Only 150 active distinguished practitioners may be elected to each academy.
 - **Andrew J. Smith** received the Rho Chi National Faculty Advisor of the year, and he was elected to the Rho Chi executive board as Region VI Councilor.
 - **Barbara S. Wiggins** is now a pharmacy specialist-cardiology in the Department of Pharmacy Services at Medical University of South Carolina and adjunct associate professor, South Carolina College of Pharmacy.
- Publications (limited to 3):**
- Haas CE, Eckel S, Arif S, et al. Acute care clinical pharmacy practice: unit- versus service-based models. *Pharmacotherapy* 2012;32:e35–e44.
 - **Arif S**, Poon H. Tadalafil: a long-acting phosphodiesterase-5 inhibitor for the treatment of pulmonary arterial hypertension. *Clin Ther* 2011;33:993–1004.
 - **Maxwell CB, Jenkins AT**. Drug-induced heart failure. *Am J Health Syst Pharm* 2011;68:1791–804.
 - **DiDomenico RJ**. Fibrinolytics. In: Wiggins B, Sanoski S, eds. *Emergency Cardiovascular Pharmacotherapy: A Point-of-Care Guide*. Bethesda, MD: American Society of Health-System Pharmacists, 2012:chap 6.
 - **Chow SL, Singh H, DiDomenico RJ, Dunn SP, Johnson SG, Marrs JC, Vardeny O, Bleske BE**. Key articles related to complementary and alternative medicine in cardiovascular disease. Part 2. *Pharmacotherapy* 2011;31:208e–277e.
 - **Ensor CR**, Trofe-Clark J, Gabardi S, McDevitt-Potter LM, Shullo MA. Generic maintenance immunosuppression in solid organ transplant recipients. *Pharmacotherapy* 2011;31:1111–29.
 - **Ensor CR**, Doligalski CT. Antibody mediated rejection of the cardiac allograft. In: Moffatt-Bruce S, ed. *Cardiac Transplantation*. Rijeka, Croatia: InTech, 2012:23–40.
 - **Finks SW, Airee A, Chow S, Macaulay TE, Moranville MP, Rogers KC, Trujillo T**. Key articles of dietary interventions that influence cardiovascular risk. *Pharmacotherapy* 2012 Feb 13. [Epub ahead of print]
 - **Miller DF**, Garcia D, Kreys T, Phan SV, Vandenberg A, Garrison KL. Evaluating the quality of performance of medication reconciliation on hospital admission. *Hosp Pharm* 2012. In press.
 - You JJ, Singer DE, **Howard PA**, et al. Antithrombotic therapy for atrial fibrillation. Antithrombotic therapy and prevention of thrombosis, 9th ed: American College of Chest Physicians Evidence-Based Clinical Practice Guidelines. *Chest* 2012;141(suppl):e531S–e575S.
 - **Crouch MA, Colucci VJ, Howard PA, Spinler SA**. P2Y12 receptor inhibitors: integrating ticagrelor into the management of acute coronary syndrome. *Ann Pharmacother* 2011;45:1151–6.
 - **Lee CR**, Bass A, Ellis K, Tran B, Steele S, Caughey M, Stouffer GA, Hinderliter AL. Relation between digital peripheral arterial tonometry and brachial artery ultrasound measures of vascular function in patients

with coronary artery disease and in healthy volunteers. *Am J Cardiol* 2012;109:651–7.

- **Miller AE**, Montague D, **Rodgers JE**, Sanghvi S, Whinna HC, Krumnacher H. Substitution of a heparin correlation value for activated partial thromboplastin time in heparin nomograms. *Am J Health Syst Pharm* 2011;68:893–8.
- **Tisdale JE**, **Overholser BR**, Sowinski KM, Wroblewski HA, Amankwa K, Borzak S, Coram R, Kingery J, Zipes DM, Flockhart DA, Kovacs RJ. Enhanced sensitivity to drug-induced QT interval lengthening in patients with heart failure due to left ventricular systolic dysfunction. *J Clin Pharmacol* 2011 Nov 1. [Epub ahead of print]
- **Tisdale JE**, Wroblewski HA, Kingery JR, **Overholser BR**, **Trujillo TN**, Kovacs RJ. Prospective, observational study of the prevalence of QT interval prolongation in patients admitted to cardiac care units in a large urban medical center and frequency of subsequent administration of QT interval-prolonging drugs. *Drug Saf* 2012. In press.
- **Tisdale JE**. Review of cardiac arrhythmias and rhythm interpretation. In: Wiggins BS, Sanoski CA, eds. *Emergency Cardiovascular Pharmacotherapy: A Point-of-Care Guide*. Bethesda, MD: American Society of Health-System Pharmacists, 2012:13–48.
- **Vardeny O**, Hermanson MP, Andrei A, Detry MA, Stein JH. Differential effects of carvedilol and metoprolol on glycemic and lipid variables in hypertension are influenced by β -AR polymorphisms. *Am J Hypertens* 2012. In press.
- **Vardeny O**, Pouleur AC, Takeuchi M, Appelbaum E, Verma A, Prescott MF, Smith B, Dahlof B, Solomon SD. Influence of diabetes on left ventricular mass regression with aliskiren, losartan, or both. *J Renin Angiotensin Aldosterone Syst* 2012 Mar 13. [Epub ahead of print]
- **Wiggins BS**, **Sanoski CA**, eds. *Emergency Cardiovascular Care: A Point-of-Care Guide*. Bethesda, MD: American Society of Health-System Pharmacists, 2012.
- **Wiggins BS**. Therapeutic hypothermia. In: **Wiggins BS**, **Sanoski CA**, eds. *Emergency Cardiovascular Pharmacotherapy: A Point-of-Care Guide*. Bethesda, MD: American Society of Health-System Pharmacists, 2012.
- Zaiken K, **Cheng JWM**. Azilsartan medoxomil: a new angiotensin receptor blocker. *Clin Ther* 2011;33:1577–89.

Central Nervous System PRN

Grants:

Mayo Clinic and partners to explore new ways to predict and control seizures

Name: **Jim Cloyd, Pharm.D.**

The grant awards \$1.5 million a year for up to 5 years. The principal investigators of the studies are Greg Worrell, M.D., Ph.D., Mayo Clinic; Ned Patterson, DVM, Ph.D., University of Minnesota College of Veterinary Medicine; Jim Cloyd, Pharm.D., University of Minnesota College of Pharmacy; Charles Vite, DVM, Ph.D., University of Pennsylvania School of Veterinary Medicine; Brian Litt, M.D., Perelman School of Medicine at the University of Pennsylvania; and Kent Leyde, the chief technology officer of NeuroVista Corporation of Seattle, Washington.

New ACCP Fellows:

Collin A. Hovinga, Pharm.D., M.S., Dell Children's Medical Center-PSS/UT Austin, 1301 Barbara Jordan Boulevard, Suite 200, Austin, TX 78723-3078

Kelly C. Lee, Pharm.D., BCPP, UCSD Skaggs School of Pharmacy, 9500 Gilman Drive, MC 0719, La Jolla, CA 92093-0001

Clinical Administration PRN

The Clinical Administration PRN has been actively pursuing a list of endeavors for 2012. The Programming/Focus Session Committee is working with the Industry PRN to address one of the main concerns voiced by members in our most recent survey. The program is titled "Effective Communication of the Value of Clinical Pharmacy Services." The Research and Scholarship Committee plans to complete grant instructions and an application for PRN members to be available in the coming months. A committee is working on an outline for a PRN opinion paper. A rough draft is expected sometime this summer.

Students are requesting a more active role in the PRN. The PRN has initiated a PRN Student Liaison Committee. At this time, the committee members are working closely with the ACCP StuNet Advisory Committee (SNAC) to highlight each of the PRNs to students. The PRN is working on an application for students to apply to the PRN for a travel award to attend the ACCP Annual Meeting. Much growth is anticipated in student participation in the near future.

The PRN has teamed with the Geriatrics PRN to inform and educate AARP members regarding the role pharmacists and the profession can play in helping AARP members lead healthy lives. Articles from our PRN in AARP-related publications are anticipated in the near future.

The PRN has renewed dialogue with the Leadership Academy and is actively engaged in seeking topics, editors, and names of potential speakers for the Academy Newsletter and Certificate Program.

Notable Achievements:

Christopher K. Finch, Pharm.D., FCCM, BCPS, assistant director, Clinical Pharmacy Services, at Methodist University Hospital and associate professor at the University of Tennessee College of Pharmacy was recently recognized as a Fellow of the American College of Critical Care Medicine.

Roy Guharoy, Pharm.D., the chief pharmacy officer and a professor of medicine, University of Massachusetts Health Care, together with Robert W. Finberg, M.D., and Richard Haidack, a professor and chair, Department of Medicine, University of Massachusetts Medical School, recently wrote the book titled *Clinical Use of Anti-infective Agents: A Guide on How to Prescribe Drugs Used to Treat Infections*.

Mary E. Temple, Pharm.D., M.S., BCPS, a clinical specialist, Neonatology, Pediatrics and Maternal Medicine, and the director of the PGY1 Pharmacy Residency, Hillcrest Hospital – Cleveland Clinic, recently graduated with a B.S. degree in pharmaceutical outcomes and research with a specialization in institutional pharmacy leadership from the University of Florida.

John Noviasky, Pharm.D., BCPS, clinical coordinator, Upstate University Hospital at CGH, Syracuse, New York, received approval for an FDA grant for his project titled “Impact of Prescriber Education on Prescribing Patterns for Quetiapine.”

Critical Care PRN

Congratulations to SCCM members of the PRN—Special Awards:

Judith Jacobi, Pharm.D., FCCM, FCCP, BCPS, was awarded the Society of Critical Medicine’s (SCCM) Distinguished Service Award. The award recognizes SCCM members who have made

exceptional leadership contributions that have furthered the vision and mission of SCCM.

Sandra L. Kane-Gill, Pharm.D., M.S., FCCM, FCCP, accepted the Excellence in Using Technology to Improve ICU Medication Safety Award given by the Clinical Pharmacy and Pharmacology (CPP) Specialty Section of SCCM for a project titled “Human-Patient Simulator” (SimMan, Laerdal Medical). Additional awardees for this project were Daniel G. Ford, Pharm.D.; Amy L. Seybert, Pharm.D.; Pamela L. Smithburger, Pharm.D.; Lawrence R. Kobulinsky; and Joseph T. Samosky, Ph.D.

Mitchell S. Buckley, Pharm.D., FCCM, BCPS, accepted the Innovations in ICU Medication Safety Award given by the CPP Specialty Section of SCCM for a project titled “Impact of a Pharmacist-Conducted Admission Medication Reconciliation Program on Unintended Medication Discrepancies.” Additional awardees for this project were Craig A. Wesley, Pharm.D.; Butch David, R.Ph.; Earnest Alexander, Pharm.D., FCCM; Pamela L. Smithburger, Pharm.D., BCPS; Sandra L. Kane-Gill, Pharm.D., FCCM, FCCP; Lisa Harinstein, Pharm.D., BCPS; Kimberly Clark, Pharm.D., BCPS; and Sandeep Devabhakthuni, Pharm.D., BCPS.

Congratulations to New ACCM Fellows

Eight ACCP Critical Care PRN members were recently inducted as fellows of the American College of Critical Care Medicine. This distinction is granted to less than one-half of those who apply and signifies the individual’s “outstanding contributions to the collaborative field of critical care.” Members who were inducted in 2012 include Amy L. Dzierba, Pharm.D., BCPS; Christopher K. Finch, Pharm.D.; Lisa Hall Zimmerman, Pharm.D.; Thomas J. Johnson, Pharm.D., MBA, BCPS; Ishaq Lat, Pharm.D., BCPS; Eric W. Mueller, Pharm.D., R.Ph.; Catherine A. Pierce, Pharm.D.; and G. Christopher Wood, Pharm.D.

Promotions:

A. Shaun Rowe: Accepted a new position as an assistant professor, The University of Tennessee College of Pharmacy, Department of Clinical Pharmacy

Awards:

- **A. Shaun Rowe:** Neurocritical Care Society Travel Award
- **Darla Eastman:** Rho Chi Appreciation Award, 2012
- **Nicole M. Acquisto:** 2011 Researcher of the Year, ACCP New York State Chapter

Publications:

1. Wall GC, Schirmer LL, **Anliker LE**, Tigges AE. Pharmacotherapy for pouchitis. *Ann Pharmacother* 2011;45:1127–37.
2. Koenigsfeld CF, Wall GC, Miesner AR, Schmidt G, Haack SL, **Eastman DK**, Grady S, Fornoff A. A faculty-led mock residency interview exercise for fourth-year doctor of pharmacy students. *J Pharm Pract* 2012 Feb 2. [Epub ahead of print]
3. Marr A, Mertense R, **Eastman DK**. Reactive arthritis induced by recurrent *Clostridium difficile* colitis. *Rheumatol Rep* 2012;4:e1–e3.
4. Grim SA, **Berger K**, Teng C, et al. Timing of susceptibility-based antifungal drug administration in patients with *Candida* bloodstream infection: correlation with outcomes. *J Antimicrob Chemother* 2012;67:707–14.
5. **Bentley ML**, Tolwani AF. Acute and chronic renal failure and management. In: Roberson PR, Todd SR, eds. *Society of Critical Care Medicine. Comprehensive Critical Care: Adult*. Mount Prospect, IL: Society of Critical Care Medicine, 2012:chap 31.
6. **Anliker LE**, Kiser TK, Fish DN, MacLaren R, Sherman D, Neumann R, Mueller S. Evaluation of vancomycin and cefepime pharmacokinetics in critically ill neurosurgical patients. *Crit Care Med* 2011;39:abstract 694.
7. **Anliker LE**, Kiser TK, Fish DN, MacLaren R. Pharmacokinetic analysis of medication clearance for critically ill patients receiving continuous renal replacement therapy. *Crit Care Med* 2011;39:abstract 737.
8. **Berger K**, Johnson MT, Micek S. Effect of previous exposure to fluoroquinolones on cross resistance and gram negative sepsis mortality. *Crit Care Med* 2011;39:abstract 109.

Critical Care PRN Committee Activities:

Communications Committee – Scott Bolesta, Pharm.D., BCPS (Chair)

Although the Communications Committee is currently addressing its ongoing charges of updating the PRN History Document, coordinating the dissemination of PRN communications, and reviewing and updating the PRN Guidelines, its largest effort this year will be resurrecting the Critical Care PRN Newsletter. It has been almost 12 years since the Critical Care PRN published a newsletter. The newsletter will be used to keep PRN members abreast of ongoing activities within the PRN

and ACCP between the biannual PRN Reports and ACCP meetings. Look for the first issue of the 2012 Critical Care PRN Newsletter to be distributed sometime in midsummer.

Recognition Committee – Christopher Paciullo, Pharm.D., BCPS (Chair)

The Recognition Committee has been busy facilitating the nomination of PRN members for the ACCP Education Award, Russell R Miller Award, and Clinical Practice Award. In addition, the committee has worked on nominating newer members for the ACCP New Clinical Practitioner, New Educator, and New Investigator awards. Please look for the annual Recognition Survey e-mail. This survey will attempt to capture all the accomplishments, awards, and outside recognition received by PRN members in the past year. In addition, the Recognition Committee will be responsible for coordinating the annual PRN awards. Please start thinking about the PRN member colleagues whom you might want to nominate for the Clinical Practitioner Award and Research Award.

Student, Resident, Fellow Committee – Pamela L. Smithburger, Pharm.D., BCPS (Chair)

The Critical Care PRN Student/Resident/Fellow Committee has developed and maintained a “Guide to PRN,” which summarizes fundamental principles about the Critical Care PRN, including leadership, opportunities for committee work, current trainee representation, activities, and awards. The Critical Care PRN Student/Resident/Fellow Committee also organizes the dissemination of an offer for complimentary PRN membership to all critical care residents and fellows. The “Guide to PRN” was included as part of the initial e-mail (and reminder e-mail) sent to program directors regarding the complimentary membership in April 2011.

Travel Award Committee – Michael L Bentley, Pharm.D. (Chair), Darla Eastman, Pharm.D., BCPS (Co-Chair), Nicole Acquisto Lynn Anliker Karen Berger, Elizabeth Farrington, Kellie Fortier, Rob MacLaren, Karea Petros, Bill Reed, Shaun Rowe

Committee’s Activities – The Travel Award Committee oversees two awards. Each is generally awarded to one individual to help support the costs of travel and attendance at the ACCP Annual Meeting. A call for abstracts will be sent to PRN members in August for the 2012 ACCP Annual Meeting. The winner is chosen on the basis of general abstract grading criteria (i.e., points awarded for introduction, hypothesis,

methods, results, and conclusion). The amount of each award may vary, depending on funding, but it has been \$1250.00 in recent years. Following are additional details regarding these awards.

Resident and Fellow Travel Award: The Critical Care PRN will award one travel grant per year to partly support the costs of travel and attendance of critical care fellows or residents at the ACCP Annual Meeting. To be eligible to apply, the candidate must meet the following criteria:

- Be a current member of the Critical Care PRN.
- Be currently completing training, or has completed training within the past 6 months, in a critical care residency or fellowship program (under the direction of a Critical Care PRN member) or a PGY1 residency.
- Have an abstract accepted for presentation at the ACCP Annual Meeting. For applicants who have completed training within the past 6 months, the research being presented must have been a project completed during their residency or fellowship training.

Young Investigator Travel Award: The Critical Care PRN will award one travel grant per year to partly support the costs of travel and attendance of a young investigator at the ACCP Annual Meeting. To be eligible to apply, the candidate must meet the following criteria:

- Be a current member of the Critical Care PRN
- Have completed training within the past 3 years
- Have an abstract accepted for presentation at the ACCP Annual Meeting

For each award, the recipient will be required to present his or her work as a platform presentation of no more than 10 minutes at the Critical Care PRN networking and business meeting at the ACCP Annual Meeting.

Drug Information PRN

Promotions:

Julie P. Karpinski, Pharm.D., BCPS: Promotion to an associate professor and a pharmacy practice director, Drug Information, Concordia University School of Pharmacy

Dr. Dennis F. Thompson has been named the dean of the College of Pharmacy at Southwestern Oklahoma State University in Weatherford.

Grants:

Ward KE, Szumita LB. "Promoting Safe Use of Medications by Providing Medication Education to Seniors Receiving Meals on Wheels." Granting agency: FDA; award amount: \$38,000

Publications:

Rosselli JL, Thacker SM, **Karpinski JP**, Petkewicz KA. Treatment of IgA nephropathy: an update. *Ann Pharmacother* 2011;45:1284–96.

Karpinski JP. Medication expiration and beyond use dating. *Drug Store News Continuing Education. Pharmacy Tech News CE Lesson*, Summer 2011

Kier K, **Goldwire MA**. Drug information resources and literature retrieval. In: *Pharmacotherapy Self-Assessment Program*. Lenexa, KS: American College of Clinical Pharmacy, 2011.

Labdi BA. What drug is this? In: Zlatic TD, Zellmer WA, eds. *Nourishing the Soul of Pharmacy: Stories of Reflection*. Lenexa, KS: ACCP, 2011.

Labdi BA. Brentuximab vedotin in the treatment of CD30-positive lymphomas. *HOPA News* 2012;9.

Other Notable Achievements:

Sandra Harley Counts, Pharm.D., Editorial Board for *DynaMed Point of Care Database*, part-time medical writer for *DynaMed reviews*; faculty at *AnMed Health Family Medicine Residency Program*

Labdi BA. Paradigm shift in VTE prophylaxis after knee and hip replacement surgery. Paper presented at: *Virginia Society of Health System Pharmacists annual meeting*; October 28, 2011; Norfolk, VA.

Fox ER, Pharm.D., received an ISMP Cheers award. Dr. Fox directs the University of Utah Drug Information Service, which provides shortage information on ASHP's Web site to keep the health care community up-to-date.

Education and Training PRN

The Education and Training PRN membership has grown to more than 380 members who are advancing the PRN's mission. Our goal is to promote dialogue and interaction to develop programs that enhance the knowledge and skills needed to provide education and training within clinical pharmacy. The PRN and its members are proud to share our many accomplishments during the past several months, and they anticipate a busy year for 2012–2013.

Our Scholarly Activities Committee published a paper in the November 2011 issue of the *American Journal of Pharmaceutical Education* on implementing active learning in U.S. schools of pharmacy curricula. The committee is planning the development of a book that will offer useful teaching tips for clinical faculty and preceptors. A special thanks to Tina Denetclaw for her leadership on this very active committee.

At the upcoming ACCP Spring Updates in Therapeutics® meeting in Reno, Nevada, the EDTR PRN will host a networking breakfast on Monday, April 30, at 7:30 a.m. Mark your calendars to attend—this will be a good opportunity to meet other PRN members and exchange ideas about teaching and learning.

The EDTR PRN will host mock interviews again this year for students, residents, and fellows during its business meeting at the 2012 Annual Meeting in October. We welcome interviewees (students, residents, and fellows) as well as interviewers. You need not be a member of the PRN to participate. Be watching for additional details through the PRN e-mail list in September 2012. In the meantime, please contact Haley Phillippe (mccrahl@auburn.edu) or Kristi Kelley (watsokm@auburn.edu) for additional information. Feel free to share this information with colleagues at your respective institutions.

The EDTR is growing and would like to continue expanding its membership! We encourage ACCP members who are interested improving clinical pharmacy education and training to join the EDTR PRN.

EDTR PRN Member Achievements

Promotions:

Amy Tiemeier, Pharm.D., BCPS: Dr. Tiemeier has accepted a new position at the St. Louis College of Pharmacy. She will become the director of professional affairs for the college.

Lamis R. Karaoui, Pharm.D., BCPS: Dr. Karaoui was recently appointed as the director of experiential education – School of Pharmacy, Lebanese American University.

Heather P. Whitley, Pharm.D., BCPS, CDE: Dr. Whitley will be promoted to an associate clinical professor at Auburn in the fall.

Awards:

Christina M. Madison, Pharm.D., BCACP:

One to One Counseling Award from Pharmacy Today Magazine and the American Pharmacist Association (APhA), receiving an honorable mention. Dr. Madison was one of 20 pharmacists in the country to receive this award (March 10, 2012, in New Orleans, Louisiana). Achieved board certification—Board Certified Ambulatory Care Pharmacy (BCACP)

Grants – Extramural Funding:

Heather P. Whitley, Pharm.D., BCPS, CDE

Whitley HP. "Diagnosing Diabetes in a Rural Alabama Family Medicine Practice." Principal investigator; 2012–2013: Diabetes Hand Foundation. \$10,000 on August 5, 2011. Status: funded

Foster J, Whitley HP, Berns C, Thomas C. "Capstone Rural Health Center patient safety and clinical pharmacy collaborative." Coinvestigator; 2011: Project IMPACT: Diabetes Community. American Pharmacists Association Foundation. \$25,000 on March 8, 2011. Status: funded

Publications:

- **Brenda L. Gleason, Pharm.D.; Michael J. Peeters, Pharm.D., MEd, BCPS; Beth H. Resman-Targoff, Pharm.D., FCCP; Samantha Karr, Pharm.D., BCPS, BCACP; Sarah McBane, Pharm.D., BCPS, CDE; Kristi Kelley, Pharm.D., BCPS, CDE; Tyan Thomas, Pharm.D.; and Tina H. Denetclaw, Pharm.D., BCPS**
Gleason BL, Peeters MJ, Resman-Targoff BH, Karr S, McBane S, Kelley K, Thomas T, Denetclaw TH. An active-learning strategies primer for achieving ability-based educational outcomes. *Am J Pharm Educ* 2011;75:Article 186.
- **Tyan Thomas, Pharm.D.; Samantha Karr, Pharm.D., BCPS, BCACP; Kristi Kelley, Pharm.D., BCPS, CDE; and Sarah McBane, Pharm.D., BCPS, CDE**

Thomas T, Karr S, Kelley KW, McBane S. Overcoming barriers to scholarly activity in a clinical practice setting. *Am J Health Syst Pharm* 2012;69:465–7.

- **Heather P. Whitley, Pharm.D., BCPS, CDE**
Whitley HP. Monetary value of a prescription assistance program service in a rural family medicine clinic. *J Rural Health* 2011;27:190–5.

Presentations:

- **Heather P. Whitley, Pharm.D., BCPS, CDE**
Whitley HP. Obesity in Alabama. Presented at: Tuscaloosa Dietetic Association; January 2012; CPE Level II; Tuscaloosa, AL.

Whitley HP. Choosing incretin products for treating diabetes mellitus. Presented at: Summer New Consultant Update and Therapeutic Conference, Auburn University Harrison School of Pharmacy; July 2011; Auburn, AL.

Whitley HP. A medley of diabetes topics. Presented at: Alabama Pharmacy Association 128th Annual Convention & Trade Show; June 2011; Sandestin, FL.

Whitley HP. Alabama Obesity Task Force update. Presented at: Boshell Diabetes and Metabolic Disease Research Day, Auburn University; March 2011; Auburn, AL.

- **Lamis R. Karaoui, Pharm.D., BCPS**
Karaoui LR. Implementation of and experience with a locally developed summative exit exam delivered to Pharm.D. students before graduation. Presented at: ACCP Annual Meeting; October 2011.

Leadership:

- **Heather P. Whitley, Pharm.D., BCPS, CDE**
Southeastern Diabetes Education Services, Board member – February 2012 to present
Alabama State Obesity Task Force, Alabama Department of Public Health; Chair – February 2011–2012
- **Christina M. Madison, Pharm.D., BCACP**
Dr. Madison was elected as president-elect of the Nevada Public Health Association (NPHA) for 2012, and she will serve as president in 2013.

Other Notable Accomplishments:

- **Heather P. Whitley, Pharm.D., BCPS, CDE**
Appearance in two international videos:
 - Big Blue Test 2011: Moundville Medical Clinic near Tuscaloosa, AL, documentary. Filmed in Tuscaloosa, Alabama, on October 11, 2011. Released at www.youtube.com/watch?v=ZXhAjsqLV9U and <http://bigbluetest.org/> on November 8, 2011. Sponsored by the Diabetes Hands Foundation
 - Do the Big Blue Test: Help Yourself, Help Others, Big Blue Test, World Diabetes Day 2011 promotional Internet video featured specialist. Filmed in Tuscaloosa, Alabama, on October 11, 2011. Released at www.youtube.com/watch?v=mSeA7f1iYIQ and <http://bigbluetest.org/> on November 1, 2011. Sponsored by the Diabetes Hands Foundation

Emergency Medicine PRN

Current Officers:

Chair: Kevin O. Rynn, Pharm.D., FCCP, DABAT
Chair-Elect: Nicole M. Acquisto, Pharm.D., BCPS
Secretary/Treasurer: Asad (Sid) Patanwala, Pharm.D., BCPS
Media Chair: Wichitah P. Leng, Pharm.D.

Please stop by the Emergency Medicine PRN (EMED PRN) table at the ACCP networking breakfast on Sunday, April 29, 2012, from 7:30 a.m. to 9:00 a.m. at the Peppermill Resort, Reno, Nevada, as part of the series of networking breakfasts during ACCP's 2012 Updates in Therapeutics®.

The EMED PRN would like to acknowledge and congratulate all of its members on their accomplishments and achievements:

Awards:

Nicole M. Acquisto, Pharm.D., BCPS: New York State Chapter of ACCP – Research of the Year 2011

Eric H. Gilliam, Pharm.D., BCPS: Hawaii Pharmacists Association's 2011 Innovative Pharmacy Practice Award in recognition of starting the ED pharmacy program at his institution

Stephanie Weightman, Pharm.D., BCPS, together with Children's Medical Center, Dallas, TX: APhA's 2011 Immunization Champion

Award in recognition of an EM pharmacist-led multidisciplinary collaboration to increase the use of an in-house program that provides influenza vaccines at no charge to household contacts of patients, with more than 340 influenza vaccines administered in the ED to household contacts, 90% of which are provided by EM pharmacists and pharmacy interns

Presentations:

• **Megan Musselman, Pharm.D., BCPS, and Suprat Saely, Pharm.D., BCPS:**

Saely S, Musselman ME, Bora KM. Case series of severe calcium channel blocker toxicity treated with high concentration infusion of high dose insulin. *Clin Toxicol* 2011;49:593. Presented at: Annual Meeting of the North American Congress of Clinical Toxicology; September 2011; Washington, DC.

Musselman ME, Saely S, Faris PJ, Browning LA, Sherwin RL, Zimmerman LH. Does etomidate dosing for rapid sequence intubation impact hemodynamics? *Ann Emerg Med* 2011;58:S282. Presented at: American College of Emergency Physicians (ACEP); October 2011; San Francisco, CA.

Musselman ME, Smolinske S, Aaron C, Farber M, Saely S. A comparison of high-dose insulin therapy and conventional inotropic therapy in calcium channel blocker and/or β -blocker toxic ingestions. *Ann Emerg Med* 2011;58:S325. Presented at: ACEP; October 2011; San Francisco, CA.

• **Kevin O. Rynn, Pharm.D., FCCP, DABAT:** Cocchio C, Geib AJ, **Rynn KO.** Physiochemical stability of intravenous fat emulsion in combination with medications used during resuscitation. Paper presented at: 2011 Annual Meeting of the North American Congress of Clinical Toxicology; September 2011; Washington, DC.

• **Michener L, Hanes S, Abel M, Rosenkranz J, Rynn K, Garber S, Mamidi S, Meredith G.** ICLB: a team-based curricular integration project. Paper presented at: American Association of Colleges of Pharmacy Annual Conference; July 2011; San Antonio, TX; and Illinois Pharmacist Association Annual Conference; September 2011; Springfield, IL.

• **Michael C. Thomas, Pharm.D., BCPS:** Weant KA (Program Chair/Moderator), **Thomas MC** (New windows, same old house), Weant KA (If you can't go in reverse, you better have a good map to follow). Meeting the challenges of acute stroke management in the emergency department. Activity No. 204-000-11-214-LO1P. Presented at: ASHP Midyear Clinical Meeting & Exhibition; December 5, 2011; New Orleans, LA.

Draper-Eppert H (Moderator), **Thomas MC** (Updates in basic life support and pulseless algorithms), Witsil J (Symptomatic arrhythmias and post-cardiac arrest care in adults for 2010 ACLS), Manzi S (PALS updates-2010 guidelines). Do you know your new alphabet – updates in the ACLS and PALS guidelines. Presented at: Live Webinar; American Society of Health-System Pharmacists; May 18, 2011.

Ott CA (Moderator and Psychiatric Disorders Speaker), **Thomas MC** (Emergency Medicine Speaker). Psychiatric disorders and emergency medicine. Activity No. 0217-0000-11-025-L01-P (3 hours). Presented at: Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review Course. ACCP 2011 Updates in Therapeutics® meeting; April 10, 2011; Columbus, OH.[Scheduled to speak again in May 2012]

Publications:

• **Nicole M. Acquisto, Pharm.D., BCPS:** Patanwala AE, Sanders AB, Thomas MC, **Acquisto NM**, Weant KA, Baker SN, Merritt EM, Erstad BL. A prospective multicenter study of the methods of medication error interception by emergency department pharmacists. *Ann Emerg Med*. In press.

Baker S, **Acquisto NM**, Dodds Ashley E. Evaluation of emergency pharmacist services on antimicrobial stewardship for ambulatory patients discharged from the emergency department. *J Pharm Pract*. In press.
Morse B, DiCenzo R, Baciewicz G, Tessena M, **Acquisto NM**, Hutchinson D, Morris M. Monocarboxylate transporter inhibition with osmotic diuresis increases gamma-hydroxybutyrate renal elimination in humans: a proof-of-concept study. *J Clin Toxicol* 2011;1:2.

Thomas MC, **Acquisto NM**, Patanwala AE, Weant KA, Baker SN. Key articles and guidelines for the emergency medicine pharmacist. *Pharmacotherapy* 2011;31:454e–491e.

- **Paul T. Green, Pharm.D., BCPS:**
Kupas DF, Shayhorn MA, **Green PT**, Payton TF. Structured inspection of medications carried and stored by emergency medical services agencies identifies practices that may lead to medication errors. *Prehosp Emerg Care* 2012;16:67–75.
- **Erica M. Merritt, Pharm.D.:**
Patanwala AE, Sanders AB, Thomas MC, Acquisto NM, Weant KA, Baker SN, **Merritt EM**, Erstad BL. A prospective multicenter study of the methods of medication error interception by emergency department pharmacists. *Ann Emerg Med*. In press.
- Megan Musselman, Pharm.D., BCPS, and Suprat Saely, Pharm.D., BCPS:
Musselman ME, Browning LA, Parker D Jr, **Saely S**. Neuroleptic malignant syndrome associated with the use of prochlorperazine in a patient with a recent history of antipsychotic-induced neuroleptic malignant syndrome. *Ann Pharmacother* 2011;45:e61.
- **Asad (Sid) Patanwala, Pharm.D., BCPS:**
Patanwala AE, Sanders AB, Thomas MC, Acquisto NM, Weant KA, Baker SN, Merritt EM, Erstad BL. A prospective multicenter study of the methods of medication error interception by emergency department pharmacists. *Ann Emerg Med*. In press.

Patanwala AE, Edwards CJ, Stolz L, Amini R, Desai A, Stolz U. Should morphine dosing be weight-based for analgesia in the emergency department? *J Opioid Manag* 2012;8:51–5.

Patanwala AE, Barletta JF, Erstad BL. Pharmacoepidemiology and patient safety in the critically ill. *Pharm Policy Law* 2012;14:93–104.

Baggs JH, **Patanwala AE**, Williams EM, Erstad BL. Dosing of 3-factor prothrombin complex concentrate for international normalized ratio reversal. *Ann Pharmacother* 2012;46:51–6.

Thomas MC, Jennett-Reznek AM, **Patanwala AE**. Combination of ketamine and propofol versus either agent alone for procedural sedation in the emergency department. *Am J Health Syst Pharm* 2011;68:2248–56.

Thomas MC, Acquisto NM, **Patanwala AE**, Weant KA, Baker SN. Key articles and guidelines for the emergency medicine pharmacist. *Pharmacotherapy* 2011;31:454e–491e.

- **Kevin O. Rynn, Pharm.D., FCCP, DABAT:**
Rynn KO, **Hughes FL**. Toxicology. In: Wiggins BS, Sanoski CA, eds. *Emergency Cardiovascular Pharmacotherapy*. Bethesda, MD: American Society of Health-System Pharmacists, 2012:201–26.
- **Michael C. Thomas, Pharm.D., BCPS:**
Thomas MC. The value of residency training and the 2020 initiative. In: Crouch MA, ed. *Securing and Excelling in a Pharmacy Residency*. Sudbury, MA: Jones & Bartlett Learning, 2011:chap 2.

Thomas MC. Emergency medicine. In: Bainbridge JL, Barbour SY, Coyle EA, et al, eds. *Updates in Therapeutics®: The Ambulatory Care Pharmacy Preparatory Review Course*, 2011 ed. Lenexa, KS: American College of Clinical Pharmacy, 2011:1-459–1-498.

Patanwala AE, Sanders AB, **Thomas MC**, Acquisto NM, Weant KA, Baker SN, Merritt E, Erstad BL. A prospective, multicenter study of medication errors intercepted by emergency department pharmacists. *Ann Emerg Med*. In press.

Thomas MC, Acquisto NM, Patanwala AE, Weant KA, Baker SN. Key articles and guidelines for the emergency medicine pharmacist. *Pharmacotherapy* 2011;31:454e–491e. Available at www.pharmacotherapyjournal.org.

Thomas MC, Jennett-Reznek AM, Patanwala A. Combination of ketamine and propofol versus either agent alone for procedural sedation in the emergency department. *Am J Health Syst Pharm* 2011;68:2248–56.

Thomas MC, Shah S. New treatment options for acute edema attacks caused by hereditary angioedema. *Am J Health Syst Pharm* 2011;68:2129–38.

• **Kyle A. Weant, Pharm.D., BCPS:**

Thomas MC, Acquisto NM, Patanwala AE, **Weant KA**, Baker SN. Key articles and guidelines for the emergency medicine pharmacist. *Pharmacotherapy* 2011;31:454e–491e.

2012 Emergency Medicine PRN Focus Session

The EMED PRN Educational Programming Committee is developing the fall 2012 focus session for the ACCP Annual Meeting in Hollywood, Florida, titled “Traumatic Emergencies: Blood, Brain, and Bacteria.” The goal of this session is to provide practitioners working in an acute care setting and involved in the care of trauma patients with updates in major drug therapy issues related to traumatic injury.

CODE Program

Looking to expand your current EM practice? Interested in forming a partnership in which you can share ideas to further your current pharmacy practice?

Look no further! The EMED PRN has created a new program – the Collaborative Organization for Development of Emergency Medicine Pharmacists (CODE Program) – to encourage idea sharing and foster professional growth by forming meaningful partnerships among EM pharmacists. The program will continuously match participants on the basis of personally identified strengths and goals, as indicated on the registration form.

To participate, simply complete the Participant Bio found on the EMED PRN homepage under PRN Documents/CODE Program Documents/Bio for CODE Program Participant and submit the form. All members are encouraged to join! We hope this will be a great tool for us to work together to advance our practice!

The EMED PRN would also like to recognize the following committee members and volunteers.

CODE Program Committee:

Nicole M. Acquisto, Pharm.D., BCPS
Samantha S. Bastow, Pharm.D.
Wichitah Leng, Pharm.D.
Asad (Sid) Patanwala, Pharm.D., BCPS
Melissa Rubel, Pharm.D.

Mary Beth Shirk, Pharm.D., BCPS
Kyle Weant, Pharm.D., BCPS

Educational Programming Committee:

Nicole M. Acquisto, Pharm.D., BCPS
Renee Petzel Gimbar, Pharm.D.
Kevin Kaucher, Pharm.D.
Asad (Sid) Patanwala, Pharm.D., BCPS
Stephen Rolfe, Pharm.D., BCPS
Mary Beth Shirk, Pharm.D., BCPS
Kyle Weant, Pharm.D., BCPS

Media Committee Members:

Christina Candeloro, Pharm.D., BCPS
Jill Jessmer, Pharm.D.
Wichitah Leng, Pharm.D.
Christina McKenzie
Katelin Speer, Pharm.D.

Endocrine and Metabolism PRN

The Endocrine and Metabolism PRN is composed of members from a variety of practice settings. The PRN was formed to achieve the following goals and objectives. (1) Provide an opportunity for pharmacists with an interest in endocrine and metabolism disorders to promote practice, research, and education in these areas. (2) Provide a mechanism for members with similar interests to meet during ACCP meetings to network, problem solve, and discuss professional issues and opportunities. (3) Promote practice involvement; educational needs of health care professionals, students, and patients; and research activities in the areas of endocrinology and metabolism that may be favorably affected by this ACCP PRN effort.

During the past 6 months, some notable member accomplishments are as follows.

Promotions:

Candis Morello: Associate Dean for Student Affairs, University of California San Diego, Skaggs School of Pharmacy and Pharmaceutical Sciences

Grants:

Nicole Pinelli: “Effect of Liraglutide on Tacrolimus Pharmacokinetics in Renal Transplant Recipients.” Funded by: Wayne State University

Awards:

Kathryn Hurren: Pharmacist of the Year Award, Southeastern Michigan Society of Health-System Pharmacists

Publications:

• Jennifer Goldman-Levine

Goldman-Levine JD. Beyond metformin: initiating combination therapy in patients with type 2 diabetes mellitus. *Pharmacotherapy* 2011;31:44S–53S.

• Kathryn Hurren

Makowski CT, Gwinn KM, **Hurren KM.** Naltrexone/bupropion: an investigational combination for weight loss and maintenance. *Obes Facts Eur J Obes* 2011;4:489–94.

Hurren KM, Berlie HN. Lorcaserin: an investigational serotonin 2C agonist for weight loss. *Am J Health Syst Pharm* 2011;68:2029–37.

Pinelli NR, **Hurren KM.** Efficacy and safety of long-acting glucagon-like peptide-1 receptor agonists compared to exenatide twice daily and sitagliptin in type 2 diabetes mellitus: a systematic review and meta-analysis. *Ann Pharmacother* 2011;45:850–60.

• Candis Morello

Morello CM. Pharmacokinetics and pharmacodynamics of insulin analogs in special populations with type 2 diabetes mellitus. *Int J Gen Med* 2011;4:827–35.

Ghafouri N, Hirsch JD, Heydari G, **Morello CM,** Kuo GM, Singh RF. Waterpipe smoking among health sciences university students in Iran: perceptions, practices and patterns of use. *BMC Res Notes* 2011;4:496.

Morello CM. Learning life's lessons from unexpected places. In: Zlatic TD, Zellmer WA, eds. *Nourishing the Soul of Pharmacy: Stories of Reflection.* Lenexa, KS: American College of Clinical Pharmacy, 2011:25–6.

• Nicole Pinelli

Pinelli NR, Jones MC, Monday LM, Smith Z, Rhoney DH. Exogenous glucagon-like peptide-1 for hyperglycemia in critically ill patients. *Ann Pharmacother* 2012;46:124–9.

Pinelli NR, Jantz AS, Martin ET, Jaber LA. Sensitivity and specificity of glycosylated hemoglobin as a diagnostic test for diabetes and prediabetes in Arabs. *J Clin Endocrinol Metab* 2011;96:E1680–3.

Pinelli NR, Hurren KM. Efficacy and safety of long-acting glucagon-like peptide-1 receptor

agonists compared to exenatide twice daily and sitagliptin in type 2 diabetes mellitus: a systematic review and meta-analysis. *Ann Pharmacother* 2011;45:850–60.

Pinelli NR, Brown MB, Herman WH, Jaber LA. Family support is associated with success in achieving weight loss in a group lifestyle intervention for diabetes prevention in Arab-Americans. *Ethn Dis* 2011;21:480–4.

Presentations:

- **Jennifer Goldman-Levine:** Creative techniques to engage your audience in active learning. Paper presented at: ASHP Midyear Clinical Meeting & Exhibition; December 2011.
- **Nicole Pinelli:** New treatment options for the management of diabetes mellitus: focus on incretin-based therapies. Paper presented at: Detroit Medical Center 5th Annual Diabetes Symposium; October 2011; Detroit, MI.
- The following members presented at the Endocrine PRN focus session at the ACCP Annual Meeting in October:
 - **Nicole Pinelli:** Emerging therapies in diabetes
 - **Rick Hess:** GLP-1 agents in metabolic syndrome/obesity
 - **Marissa Quinones:** Metformin use for chronic kidney disease patients
 - **Kim Kelly:** Glucose variability impact
 - **Jessica Trompeter:** U-500: appropriate use and common pitfalls
 - **Tricia Russell and Craig Logemann:** ADA algorithm versus AACE algorithm for diabetes: a debate

Other Accomplishments:

Jennifer D'Souza and Christie Schumacher received BC-ADM certification.

Specialty Certification:

The Endocrine and Metabolism PRN would like to congratulate the following members who passed the specialty certification examination offered in October 2011 by the Board of Pharmacy Specialties in either pharmacotherapy or ambulatory care pharmacy.

- Becky Armor – BCACP
- Debra Barnette – BCACP
- Jessica Bellone – BCACP
- Jeffrey Cavanaugh – BCPS
- L. Brian Cross – BCACP

- Michelle Edwards – BCPS
- Paul Erwin – BCACP
- Kristin Franklin – BCACP
- Chad Gentry – BCACP
- Benjamin Gross – BCACP
- Teresa Hoffmann – BCACP
- Brian Irons – BCACP
- Jeremy Johnson – BCACP
- Michael Kane – BCACP
- Samantha Karr – BCACP
- Titilayo Kazeem – BCPS
- Naureen Khan – BCACP
- Daniel Kildow – BCACP
- Mary Klein – BCACP
- Erin Koepf – BCACP
- Robin Koffarnus – BCACP
- Debra Lopez – BCACP
- Molly Minze – BCACP
- Stephanie Nigro – BCACP
- Lewis Till – BCACP
- Ayla Tourkmani – BCPS
- Andra Traina – BCACP

The Endocrine and Metabolism PRN has more than 220 members and represents a diverse group of clinical pharmacists dedicated to advancing clinical practice, teaching, and research. The Endocrine and Metabolism PRN would like to welcome the newest members of the group since September 2011:

- Ahmad Alghamdi
- Hope Barnes
- Mary Butcher

Resident Travel Scholarship

The Endocrine and Metabolism PRN Residency Travel Scholarship is intended to provide financial support for a resident-level member to the annual or spring ACCP meeting. The applicant must be a resident member (PGY1 or PGY2) of the ACCP Endocrine and Metabolism PRN. The applicant must provide a statement of why he or she is involved with the Endocrine and Metabolism PRN and describe how attending the meeting will assist in the applicant's career and/or residency goals. A current copy of the applicant's CV, highlighting professional organizations and community service, together with one letter of recommendation are required for complete application.

Congratulations to Dr. Misty D. Gaddis, a PGY1 pharmacy practice resident at the Veteran Affairs Gulf Coast Joint Ambulatory Care Center, who will receive the ACCP Endocrine and Metabolism PRN Resident Scholarship. She will

receive \$500 to attend ACCP's 2012 Updates in Therapeutics® meeting in Reno, Nevada.

Biweekly Online Journal Club

The Communications Committee continues to lead the PRN in the biweekly online journal club on our PRN e-mail list. The online journal club was implemented in February 2010. The purpose of the online journal club is to provide an awareness of key articles that add new information to the fields of endocrinology and metabolism. Members of the PRN are periodically asked to contribute articles and comments to foster active discussion. Active members from the Communications Committee have been soliciting journal club articles from the PRN e-mail list and have been posting two articles every other week for active discussion through the PRN e-mail list. The following members have been involved in continuing the biweekly online journal club: Nicole Pinelli (Communications Committee chair), Jessica Bellone (member), Amy Calabrese Donihi (member), Kathryn Hurren (member), Christie Schumacher (member), and Jessica Trompeter (member). Please contact Nicole Pinelli, nickipinelli@wayne.edu, for more information about the online journal club.

Geriatrics PRN

The Geriatrics PRN is composed of clinical pharmacists dedicated to the care of older people as well as related issues involving aging. The PRN's membership crosses a broad spectrum of interests, ranging from clinical practice to basic and clinical research. Practice settings also run the full spectrum of health care, including home health care, ambulatory care, nursing homes, and community, Veterans Administration, and university-affiliated sites. The PRN's goals include providing programming on topics in geriatrics and aging that are of importance to its members and providing the opportunity for PRN members to network for purposes of sharing information and developing collaborative research. The following is an update of the professional involvement of Geriatrics PRN members.

Awards:

Zachary A. Marcum, Pharm.D., M.S., BCPS
NIH Loan Repayment Award (07/11–06/13)
Research selected for the Presidential Poster Section at the annual AGS meeting 2011

Grants:

Timothy Reilly, Pharm.D., FASCP, BCPS, CGP Rutgers Faculty Research Grant Program: "Avoiding Medication Errors in the Geriatric Population Through Pharmaceutical Intervention"

Publications:

Melissa Butler, Pharm.D.

Butler MG, Farley JF, Sleath BL, Murray MD, Maciejewski ML. Who looks for Medicare Part D information?: a focus on recognition of need and patient activation. *Res Social Adm Pharm* 2012 Jan 31. [Epub ahead of print]

Matthew Cantrell, Pharm.D., BCPS Skoff RA, Waterbury NV, Shaw RF, Egge JA, **Cantrell M**. Glycemic control and hypoglycemia in Veterans Health Administration patients converted from glyburide to glipizide. *J Manag Care Pharm* 2011;17:664–71.

Cantrell MA, Bream-Rouwenhorst HR, Watts C, Oetting TA. Pathophysiology and pre-operative evaluation of patients at risk for intraoperative floppy iris syndrome (IFIS). In: Zaidi F, ed. *Cataract Surgery/Book 2*. Rijeka, Croatia: InTech, 2012.

Julie A. Fusco, Pharm.D., BCPS, CGP **Fusco JA**. Elder abuse. In: Richardson MM, Chessman KH, Chant C, et al, eds. *Pharmacotherapy Self-Assessment Program, 7th ed. Geriatrics*. Lenexa, KS: American College of Clinical Pharmacy, 2011:115–29.

Olga Hilas, Pharm.D., MPH, FASCP, BCPS, CGP **Hilas O**, Ezzo D. Immunizations in the elderly. *Pharmacotherapy Self-Assessment Program, 7th ed. Geriatrics*. Lenexa, KS: American College of Clinical Pharmacy, 2011:195–207.

Hilas O. Management of gastroparesis. *US Pharm* 2011;36:HS15–HS18.

Hilas O, Avena-Woods C. Neurocardiogenic syncope: a focus on the management of vasovagal episodes. *US Pharm* 2011;36:HS2–HS11.

Zachary A. Marcum, Pharm.D., M.S., BCPS Pugh MV, Starner CI, Amuan ME, Berlowitz DR, Horton M, **Marcum ZA**, Hanlon JT. Exposure to potentially harmful drug-disease interactions in older community-dwelling veterans based on the

Healthcare Effectiveness Data and Information Set Quality Measure: who is at risk? *J Am Geriatr Soc* 2011;59:1673–8.

Marcum ZA, Perera S, Donohue JM, Boudreau RM, Newman AB, Ruby CM, Studenski SA, Kwoh CK, Simonsick EM, Bauer DC, Satterfield S, Hanlon JT. Analgesic use for knee and hip osteoarthritis in community-dwelling elders. *Pain Med* 2011;12:1628–36.

Marcum ZA, Amuan ME, Hanlon JT, Aspinall SL, Handler SM, Ruby CM, Pugh MV. Prevalence of unplanned hospitalizations caused by adverse drug reactions among older veterans. *J Am Geriatr Soc* 2012;60:34–41.

Marcum ZA, Pugh MV, Amuan ME, Aspinall SL, Handler SM, Ruby CM, Hanlon JT. Prevalence of potentially preventable unplanned hospitalizations caused by therapeutic failures and adverse drug withdrawal events among older veterans. *J Gerontol A Biol Sci Med Sci* 2012. In press.

Marcum ZA, Fried LF. Aging and anti-hypertensive medication related complications in the CKD patient. *Curr Opin Nephrol Hypertens* 2011;20:449–56.

Marcum ZA, Gellad WF. Medication adherence and polypharmacy. *Clin Geriatr* 2012. In press.

Marcum ZA, Peron EP, Hanlon JT. Medication Use in Older Adults. *The Epidemiology of Aging*. New York: Springer, 2012. In press.

Marcum ZA, Hanlon JT. Inappropriate medication use and medication errors in the elderly. In: Wehling M, Burkhardt H, eds. *Drug Therapy in the Elderly, 2nd ed*. New York: Springer-Verlag, 2012. In press.

Gellad WF, Good CB, Amuan ME, **Marcum ZA**, Hanlon JT, Pugh MV. Facility-level variation in potentially inappropriate prescribing for older veterans. *J Am Geriatr Soc* 2012. In press.

Marcum ZA, Amuan ME, Hanlon JT, Aspinall SL, Handler SM, Ruby CM, Pugh MV. Adverse drug reactions leading to hospitalization among older outpatient veterans. Poster presented at: American Geriatrics Society Annual Scientific Meeting, Presidential Poster Section; May 2011; Washington, DC.

Marcum ZA, Amuan ME, Hanlon JT, Aspinall SL, Handler SM, Ruby CM, Pugh MV. Therapeutic failures and adverse drug withdrawal events leading to hospitalization among older outpatient veterans. International Society for Pharmacoepidemiology International Conference on Pharmacoepidemiology & Therapeutic Risk Management; August 2011; Chicago, IL.

Marcum ZA, Rovesti KL, Behrens MC, Logsdon M, Aspinall SL, Francis S, Jeffrey S, Hanlon JT, Handler SM. Prevalence of adverse drug events across three VA community living centers. Paper presented at: American College of Clinical Pharmacy Annual Meeting; October 2011; Pittsburgh, PA.

Emily Peron, Pharm.D., FASCP, BCPS

Peron EP, Marcum ZA, Boyce R, Hanlon JT, Handler SM. Year in review: medication mishaps in the elderly. *Am J Geriatr Pharmacother* 2011;1:1-10.

Peron EP, Gray SL, Hanlon JT. Medication use and functional status decline in older adults: a narrative review. *Am J Geriatr Pharmacother* 2011;9:378-91.

Peron EP, Ruby CM. A primer on medication use in older adults for the non-clinician. *Generations*. Winter 2011-12.

Invited Presentations:

Wortmann R, Finn W, **Hilas O**. Gout, hyperuricemia, and chronic kidney disease: optimizing patient management. Invited faculty member of the National Kidney Foundation. Available at www.kidney.org.

Hilas O. Pursuit of post-graduate training programs upon graduation. Poster presented at: 2011 ACCP Annual Meeting; October 2011; Pittsburgh, PA.

Hilas O. Clinical interventions of pharmacy practice residents on an acute care for elders unit. Poster presented at: 2011 ACCP Annual Meeting; October 2011; Pittsburgh, PA.

Hilas O. Clinical pearls meet musical chairs: ten timely, expert roundtable discussions. Social and economic considerations of acute elder care. Speaker at: 2011 ASCP CT Senior Symposium; April 2011; Foxwoods, CT.

Other Notable Achievements:

Lavonne C. Cox, R.Ph., Development Board for the Huffington Center on Aging at Baylor College of Medicine. Served on education committee to identify speakers for local events

Jeffrey C. Delafuente, M.S., FCCP, FASCP, elected as a Distinguished Practitioner and Fellow in the National Academies of Practice

Abimbola Farinde: clinical pharmacist appointed as a committee member of the Commission for Certification in Geriatric Pharmacy

Emily P. Peron, Pharm.D., FASCP, BCPS, passed BCPS in October 2011, effective January 2012, and selected for/attended the National Institute on Aging Summer Institute on Aging Research; July 2011

Kayla Smith, Pharm.D., accepted a PGY2 in Geriatrics at the VA Connecticut Healthcare System under the mentorship of Sean Jeffery, Pharm.D., FASCP, to begin July 2012

CGP certification:

- **Timothy Reilly**, Pharm.D., FASCP, BCPS, CGP
- **Mark Wienke**, R.Ph., CGP

GI/Liver/Nutrition PRN

The GI/Liver/Nutrition PRN currently has 165 members as of March 2012 and continues to focus on the gastrointestinal, hepatology, and nutrition support disciplines.

The PRN will host a focus session at the upcoming 2012 Annual Meeting in Hollywood, Florida. The focus session, Updates in Gastrointestinal Topics, will address selected topics involving probiotics, hepatitis C, and bariatrics.

In addition, a group of PRN members is working on a position paper, "Pharmacy Services Focused in the Area of Hepatitis C Viral Infections."

The PRN leadership consists of Joe Ybarra, Pharm.D., BCNSP, President; Rima Mohammad, Pharm.D., BCPS, President-Elect; and Pramodini Kale-Pradhan, Pharm.D., Secretary/Treasurer. Finally, we would like to congratulate these PRN members for their accomplishments.

Promotions:

- **Erin Nystrom**, Pharm.D., BCNSP, promoted to an assistant residency program director, PGY1 Pharmacy Practice Residency Program, Mayo Clinic, Rochester, MN

- **Pramodini Kale-Pradhan, Pharm.D.**, promoted to Full Professor, Department of Pharmacy Practice, Eugene Applebaum College of Pharmacy and Health Sciences, Wayne State University, Detroit, MI
- **Al Roach, Pharm.D., FACG**, changed his position to a medical scientist director, Medical Scientific Affairs Department, Ironwood Pharmaceuticals

Publications:

- **Nystrom EM**. Nutrition support in the critically ill. In: Johnson T, ed. *Critical Care Therapeutics*. Sudbury, MA: Jones & Bartlett, 2012.
- McMahon MM, **Nystrom EM**, Miles JM. Parenteral nutrition in adults. In: Duggan C, Gura K, Jaksic T, eds. *Clinical Management of Intestinal Failure*. Boca Raton, FL: CRC Press – Taylor & Francis, 2011.
- **Smith A**, Henriksen B, Cohen A. Pharmacokinetic considerations in Roux-en-Y gastric bypass patients. *Am J Health Syst Pharm* 2011;68:2241–7.
- Mort JR, Shiyanbola OO, **Ndehi LN**, Xu Y, Stacy JN. Opioid-paracetamol prescription patterns and liver dysfunction: a retrospective cohort study in a population served by a US health benefits organization. *Drug Saf* 2011;34:1079–88.
- **Wilhelm SM**, Petrovitch EA. Implementation of an inpatient anticoagulation teaching service: expanding the role of pharmacy students and residents in patient education. *Am J Health Syst Pharm* 2011;68:2086–93.
- **Wilhelm SM**, **Kale-Pradhan PB**. Estimating creatinine clearance: a meta-analysis. *Pharmacotherapy* 2011;31:658–64.
- **Wilhelm SM**, Johnson JL, **Kale-Pradhan PB**. Treating bugs with bugs: the role of probiotics as adjunctive therapy for *Helicobacter pylori*. *Ann Pharmacother* 2011;45:960–6.
- **Kim JJ**, Culley CM, **Mohammad RA**. Telaprevir: an oral protease inhibitor for hepatitis C virus infection. *Am J Health Syst Pharm* 2012;69:19–33.

Other Notable Achievements:

April Smith, Pharm.D., M.A., BCPS, Invited Faculty, First Integrated Health Session Pharmacology Course at the 29th Annual Meeting of the American Society for Metabolic and Bariatric Surgery (ASMBS); June 17–22, 2012; San Diego, CA.

Hematology/Oncology PRN

The Hematology/Oncology PRN facilitates timely dissemination of information related to the clinical practice, research, and teaching of hematology and oncology among its members and serves as a resource for hematology and oncology expertise to others. The PRN provides a forum for hematology/oncology pharmacists to network and collaborate on scientific, educational, and political issues affecting clinical practice, teaching, and research.

Promotions:

Robert Ignoffo, Pharm.D., founding member of HOPA, has been promoted to an assistant dean of student services at Touro University California.

Awards:

Jai Patel, Pharm.D., a Pharmacogenomic and Oncology Fellow at the UNC Eshelman School of Pharmacy, received the Rho Chi Clinical Research Award.

Grants:

Amanda Clary, Pharm.D., a clinical oncology pharmacist, received a HOPA annual conference grant.

Rebecca Fahrenbruch, Pharm.D., BCOP, an oncology pharmacy manager at Fairview Oncology Pharmacy, received a HOPA annual conference grant.

Other Notable Achievements:

Betsy Poon, Pharm.D., FCCP, Florida Hospital for Children, was elected as the chair of the Children's Oncology Group pharmacy committee for 2011–2015.

Emily K. Pauli was elected as the 2012 vice chair of the Alabama Comprehensive Cancer Control Coalition.

Immunology/Transplantation PRN

The Immunology/Transplantation Practice and Research Network (PRN) has grown to more than 350 members! We encourage all members to get involved and to be sure to provide us with suggestions and comments to make our PRN even better.

In February 2012, a request was submitted by ACCP and the American Society of Health-System Pharmacists to the Board of Pharmacy Specialties (BPS) for its consideration of solid organ transplantation pharmacy practice as a new specialty. In a survey distributed to IMTR PRN members in October 2011, 76% of the 166 respondents thought the practice of solid organ transplantation pharmacy should be recognized as a new specialty.

In accordance with its established processes, BPS is expected to review the requests and then consider which areas of potential specialization it will explore through its usual process for consideration of proposed specialties (www.bpsweb.org). To view the request form and learn more about ACCP's ongoing efforts to expand specialty recognition, please visit <http://www.accp.com/careers/specRecog.aspx>.

Through collaborative efforts between our PRN and the AST Transplant Pharmacists Community of Practice (CoP), a white paper providing an overview of clinical pharmacists and pharmacist researchers practicing in the field of transplantation was published in August 2011 on behalf of the American Society of Transplantation Transplant Pharmacy Community of Practice and the American College of Clinical Pharmacy Immunology/Transplantation Practice and Research Network: Alloway RR, Dupuis R, Gabardi S, Kaiser TE, Taber DJ, Tichy EM, Weimert-Pilch NA; Evolution of the role of the transplant pharmacist on the multidisciplinary transplant team. *Am J Transplant* 2011;11:1576–83.

We look forward to future collaborative publications focusing on transplant pharmacists.

Promotions:

Angela Maldonado: Promotion to a clinical associate professor of pharmacotherapy

Awards:

Nicole Schmidt: American Transplant Congress Young Investigator Award 2012

Grants:

- Ian Doyle: Legacy Transplant Services Research Award, Principal Investigator, April 2012 to April 2013
- Angela Maldonado: Washington State University Pharmacotherapy Clinical Track Faculty Seed Grant Program Prospective “Donor-Specific Antibody (DSA) Monitoring Protocol to Detect Patient Characteristics and/or Changes in Immunosuppression on the Development of De Novo Antibodies,” August 1, 2011, to August 31, 2012
- Kathleen Tornatore: “The Influence of Diabetes on Myfortic (Enteric-Coated Mycophenolic Acid Sodium) Pharmacokinetics and Adverse Drug Effects in Stable African American and Caucasian Renal Transplant Recipients” (CERL080AUS91T). Novartis-Investigator Initiative; Principal Investigator, June 2011 to September 2012

“Genomic and Cellular Markers and Chronic Allograft Function” submitted to NIDDK; PAR-06-112: Pilot and Feasibility Clinical Research Grants in Kidney or Urologic Disease (R21) NIDDK, Principal Investigator; funded NIDDK-ARRA September 15, 2009, to September 15, 2011

Publications:

1. **Alloway RR**, Vanhaecke J, Yonan N, White M, Haddad H, Rabago G, Tymchak W, Diaz Molina BD, Grimm M, Eiskjaer H, Karpf C, Undre N. Pharmacokinetics in stable heart recipients after conversion from twice-daily to once-daily tacrolimus formulations. *J Heart Lung Transplant* 2011;30:1003–10.
2. Barker JH, **Alloway RR**, Furr A, Banis JC, Cunningham M, Basappa PS, Wiggins O, Frank JM, Woodle ES. Risk assessment and management in hand and facial tissue transplantation. *Eur J Trauma Emerg Surg* 2011;37:469–76.
3. Busque S, Cantarovich M, Mulgaonkar S, Gaston R, Gaber AO, Mayo PR, Ling S, Huizinga RB, Meier-Kriesche HU; **PROMISE Investigators (Alloway RR)**. The PROMISE study: a phase 2b multicenter study of voclosporin (ISA247) versus tacrolimus in de novo kidney transplantation. *Am J Transplant* 2011;11:2675–84.

4. Walsh R, Brailey P, Girnita A, **Alloway R, Rike-Shields A**, Wall G, **Basma S**, Cardi M, Tevar A, Govil A, Mogilishetty G, Roy-Chaudhury P, Woodle ES. Early and late acute antibody-mediated rejection differ immunologically and in response to proteasome inhibition. *Transplantation* 2011;91:1218–26.
5. Woodle ES, **Alloway RR**, Girnita A. Proteasome inhibitor treatment of antibody-mediated allograft rejection. *Curr Opin Organ Transplant* 2011;16:434–8.
6. Woodle ES, Walsh RC, **Alloway RR**, Girnita A, Brailey P. Proteasome inhibitor therapy for antibody-mediated rejection. *Pediatr Transplant* 2011;15:548–56.
7. **Dick TB**, Raines AA, Stinson JB, Collingridge DS, Harmston GE. Fludrocortisone is effective in the management of tacrolimus-induced hyperkalemia in liver transplant recipients. *Transplant Proc* 2011;43:2664–8.
8. **Enzor CR, Trofe-Clark J, Gabardi S, McDevitt-Potter LM, Shullo MA**. Generic maintenance immunosuppression in solid organ transplant recipients. *Pharmacotherapy* 2011;31:1111–29.
9. **Enzor CR**, Russell SD, Wittstein IS, Conte JV. *Capnocytophaga canimorsus* sepsis in an asplenic heart transplant candidate with a left ventricular assist device. *Prog Transplant* 2011;21:121–3.
10. **Gabardi S**, Catell J, **Martin ST**, Perrone R, Chandraker A, McGee CC, **McDevitt-Potter LM**. Maintenance immunosuppression with intermittent intravenous IL-2 receptor antibody therapy in renal transplant recipients. *Ann Pharmacother* 2011;45:48–53.
11. **Gabardi S**, Halloran P, Friedewald J. Managing risk in developing new transplant immunosuppressive agents: overview of the regulatory environment and risk management opportunities. *Am J Transplant* 2011;11:1803–9.
12. **Gabardi S**, Halloran P, Friedewald J. An update on risk evaluation and mitigation strategies in transplantation [letter to the editor]. *Am J Transplant* 2012;12:257–8.
13. Oetting W, Schladt D, Leduc R, **Jacobson PA**, Guan W, Matas A, Israni A. Lack of validation of SNPs previously associated with acute rejection in kidney transplant recipients by a large multi-center cohort. *Transpl Int* 2011;24:1231–8.
14. Passey C, Birnbaum AK, Brundage RC, Oetting WS, **Jacobson PA**. Dosing equation for tacrolimus using genetic and clinical factors. *Br J Clin Pharmacol* 2011;72:948–57.
15. **Hardinger KL**, Kalluri HV, Bushey S. The current state of renal transplant immunosuppression: present and future. *World J Transplant*. In press.
16. **Hardinger KL**, Hutcherson T, Preston D, Murillo D. The influence of pill burden and medication cost on renal function after transplant. *Pharmacotherapy*. In press.
17. Huiras P, **Gabardi S**. Everolimus: a review of its pharmacologic properties and use in solid organ transplantation. *Rev Health Care* 2011;2:229–41.
18. **Maldonado AQ**, Seiger TC, Urann CL, McCleary JA, Goroski AL, Ojogho ON. Billing for outpatient transplant pharmacy services. *Am J Health Syst Pharm* 2012;69:144–7.
19. **Martin ST**, Torabi MJ, **Gabardi S**. Influenza in solid organ transplant recipients. *Ann Pharmacother* 2012;46:255–64.
20. **Martin ST**. Therapeutic drug monitoring: a crash course in pharmacokinetics [editorial]. *International Society of Heart and Lung Transplantation Links Newsletter* 2012;3:257.
21. **McDevitt LM, Sadaka B, Tichy E, Rogers C, Gabardi S**. A multicenter experience with generic tacrolimus conversion. *Transplantation* 2011;92:653–7.
22. **Latran M**. Response to Klintmalm on the use of generic immunosuppression. *Am J Transplant* 2012;12:791.
23. **Sadaka B, Alloway RR**, Woodle ES. Clinical and investigational use of proteasome inhibitors for transplant rejection. *Expert Opin Investig Drugs* 2011;20:1535–42.
24. **Trofe-Clark J, Gabardi S, McDevitt-Potter LM, Alloway RR**. Immunosuppression, generic drugs and the FDA [editorial]. *Am J Transplant* 2012;12:792–3.

25. **Tornatore K**, Sudchada P, DiFrancesco R, Wilding G, Dole K, Leca N, Gundroo A, Venuto RC. Mycophenolic acid pharmacokinetics during maintenance immunosuppression in African American and Caucasian renal transplant recipients. *J Clin Pharmacol* 2011;51:1213–22.
26. Nainani N, Patel N, Tahir N, Kumar R, Weber-Shrikant E, Gundroo A, Murray B, **Tornatore K**, Blessios G, Venuto R. Effect of steroid-free low concentration calcineurin maintenance immunosuppression regimen on renal allograft histopathology and function. *Nephrol Dial Transplant* 2011 Nov 5. [Epub ahead of print]
27. **Tornatore KM**, Sudchada P, DiFrancesco RA, Attwood K, Gundroo A, Gray V, Wilding G, Hochreitter J, Venuto RC. Race and drug formulation influence on mycophenolic acid and metabolite pharmacokinetics in stable renal transplant recipients. *J Clin Pharmacol*. In press.

Book Chapters:

1. **Ensor CR, Doligalski CT**. Antibody-mediated rejection of the cardiac allograft. In: Moffatt-Bruce S, ed. *Cardiac Transplantation*. Rijeka, Croatia: InTech, 2012:23–40.
2. **Hardinger KL**, Brennan DB. Presentation, diagnosis and treatment of acute rejection. In: Kobayashi T, Arai R, eds. *Acute Rejection: Risk Factors, Management and Complications*. Hauppauge, NY: Nova Publishers, 2012. In press.
3. **Hardinger KL**, Alford K, Murillo D. The influence of bortezomib on donor-specific antibody reduction in patients with antibody-mediated rejection. In: Cecka JM, Terasaki PI, eds. *Clinical Transplants 2010*. Los Angeles: Terasaki Foundation Laboratory, 2011.
4. **Pote LA**, Lombardi TL. Transplant pharmacy practice. In: Allen LV Jr, ed. *Remington: The Science and Practice of Pharmacy*, 22nd ed. London: Pharmaceutical Press, 2012. In press.
5. **Gabardi S, Tichy EM**. Overview of immunosuppressive therapies in renal transplantation. In: Singh AK, Sayegh MH, Chandraker A, eds. *Core Concepts in Renal Transplantation*. New York: Springer, 2012:chap 6.

New ACCP Fellows:

- Steve Gabardi, Pharm.D., BCPS, Brigham Women’s Hospital, Boston, MA
- Christin Rogers, Pharm.D., BCPS, Beth Israel Deaconess Medical Center, Boston, MA
- Lisa McDevitt-Potter, Pharm.D., BCPS, Tufts Medical Center, Boston, MA

Other Notable Achievements:

Basma Sadaka: BCPS certification

Other:

New Members

We would like to welcome the following students, residents, and members to the PRN.

Laura Bascom, member
 Amanda Bitterman, student
 Darina Brezhnev, member
 Albert Cifelli, student
 Carolyn Cumming, resident
 Kathleen Eipers, member
 Alexandria Fagan, member
 Jennifer Fitch, affiliate member
 Andrew Freeman, resident
 Matthew Gillespie, resident
 Eric Gnesa, student
 Jon Godden, member
 Amanda Ingemi, resident
 Melissa Johnson, member
 John Kastanis, student
 Sarah Moehlmann, student
 Caitlin Musgrave, resident
 Ifeanyi Onor, resident
 Michael Ott, member
 Saumil Parikh, student
 Shree Patel, resident
 Regina Ramirez, member
 Flavia Rasetto, associate member
 Kathleen Schilli, member
 Jamel Scott, student
 Sarah Shao, member
 Kristin Smith, member
 Liza Takiya, member

Transplant/Immunology Residency and Fellowship

More than 20 programs recruited for transplant residents and fellows for 2012–2013. The PRN would like to congratulate the following programs and individuals who matched, based on information provided by PRN members. We apologize in advance if we inadvertently missed anyone. Congratulations!

Name	Institution	Position
Jennifer Byrns	Duke University Hospital	PGY2
Matt Gillespie	University of Utah Health Care	PGY2
Amanda Ingemi	University of Pittsburgh Medical Center	PGY2
Arin Jantz	The Methodist Hospital (Houston, Texas)	PGY2
Miae Kim	Brigham and Women's Hospital	PGY2
Hanna Lee	New York-Presbyterian Hospital	PGY2
Marissa Mako	University of Wisconsin Hospital and Clinics	PGY2
Mark Mariski	UC San Diego Health System	PGY2
Mozhgon (Nancy) Moaddab	St Luke's Episcopal Hospital (Houston, Texas)	PGY2
Ginger Morris	Yale New Haven-Transplantation Center	PGY2
Misbah Moten	Tampa General Hospital	PGY2
Caitlin Musgrave	Medical University of South Carolina	PGY2
Joelle Nelson	University Health System-San-Antonio	PGY2
Bennet Noel	University of Maryland	PGY2
Shree Patel	University of Illinois at Chicago	PGY2
Debra Ramirez	University Health System-San-Antonio	PGY2
Alexa Ray	Vanderbilt University Medical Center	PGY2
Bharath Ravichandran	UC San Diego Health System	PGY2
TrisAnn Rendulic	University of Michigan Hospital and Health System	PGY2
Heather Snyder	Methodist University Hospital (Memphis, Tennessee)	PGY2
Tracy Sparkes	Hospital of the University of Pennsylvania	PGY2
Michael Spinner	Barnes-Jewish Hospital	PGY2
Lacy Ternes	Hennepin County Medical Center	PGY2
Stephen Thai	Ochsner Medical Center	PGY2
Jill Krisl	University of Cincinnati	Fellow 2012-2013 (PGY3)
Basma Sadaka	University of Cincinnati	Fellow 2011-2013 (PGY4)

2012 ATC Abstracts Accepted

Congratulations to the following PRN members who have had abstracts accepted to the 2012 American Transplant Congress (ATC), to be held in Boston, Massachusetts, June 2–6, 2012.

Rita Alloway	Angela Maldonado
Lyndsey Bowman	Pamela Maxwell
Elise Carlson	Lisa McDevitt-Potter
Rosemary Cross	Erin Newkirk
Kelly DePeiro	Jeong M. Park
Travis Dick	Nicole Pilch
Ian Doyle	Lindsey Pote
Chris Ensor	Alexandra Powderly
Ashley Feist	Basma Sadaka
James Fleming	Nicole Schmidt
Steve Gabardi	Adele Shields
Karen Hardinger	Nimisha Soni
Matt Harris	Dave Taber
Amanda Hulbert	Eric Tichy
Mike Hurtik	Kathleen Tornatore
Pamela Jacobson	Jennifer Trofe-Clark
Jennifer Jebrok	Crystal Truax
Nicole Kenyon	Christie Truscott
Janice Kerr	Kimi Ueda
John Knorr	Anne Wiland
Mike Latran	

Congratulations to PRN members **Erin Ticehurst** and **Spencer Martin**, who had abstracts accepted to the 2012 International Society for Heart and Lung Transplantation annual meeting in Prague, Czech Republic, and to **Kathleen Tornatore**, who had an abstract accepted to the 2012 annual meeting of American Society of Clinical Pharmacology & Therapeutics in Washington, DC.

Infectious Diseases PRN

Promotions:

- **Ryan Bickel** was appointed the president of the Michigan Society of Health-System Pharmacists.
- **Michaelia Dunn** was appointed as the Antimicrobial Stewardship Program chair at Indiana University-Arnett Hospital.
- **Chris Frei** was promoted to an associate professor with tenure at the University of Texas at Austin College of Pharmacy (as of September 2012).
- **Betsy Hirsch** received an appointment at the Northeastern University School of Pharmacy as an assistant professor.

- **Angela Kashuba** was promoted to a full professor (November 2011) at the Eshelman School of Pharmacy, UNC Chapel Hill, and was promoted to a vice chair for Research and Graduate Education (November 2011).

Awards:

- **Chris Frei** received a Pharmacy Mentor Award, Texas Society of Health-System Pharmacists (April 2011); a Distinguished Young Alumnus Award, College of Pharmacy, UT Austin (September 2011); and the Society of Infectious Diseases Pharmacists Young Investigator Award (September 2011).
- **Jessica Holt** received the ASHP Best Practice Award, Pharmacist-Led Antibiotic Stewardship Program Reduces Inappropriate Antibiotic Use and Hospital-Acquired *Clostridium difficile*, and the Minnesota Society of Health-System Pharmacists Rising Star New Practitioner Award.
- **Dorothy McCoy** received the Pharmacy Residency Excellence New Preceptor Award from the American Society of Health-System Pharmacists Research and Education Foundation (2011).

Grants (limited to 3):

- **Kelly Caudle** and L. Lu received a \$10,000 grant from the American Association of Colleges of Pharmacy: "Transcriptional Regulation of Fluconazole Susceptibility in *Candida parapsilosis*" (February 2012).
- **Kelly Caudle** (Principal Investigator) received a \$6500 grant from the University Research Council for "The Role of a Hsp40 Co-chaperone in the Negative Regulation of Azole Antifungal Resistance."
- **Jessica Cottreau** (Principal Investigator) received a \$341,791 grant from the CDC for "Improving Hospital-Based Antimicrobial Prescribing Towards Reducing Antimicrobial-Resistant Hospital-Associated Infections."
- **Tom Dilworth** and Renee-Claude Mercier received the ASHP Foundation Pharmacy Resident Practice-Based Research Grant for 2011–2012 to fund the study titled "Impact of a Pharmacy Adherence Clinic on HIV Medication-Taking Self-efficacy: A Single Group, Pretest-Posttest Study" at the University of New Mexico Health Sciences Center's HIV clinic.

- **Jason Gallagher** (Principal Investigator) received a \$37,834 grant from Merck to perform "A Case-Control Study of Patients with Carbapenem-Resistant and Third-Generation Cephalosporin-Resistant *Klebsiella pneumoniae* Bacteremia."
- **Betsy Hirsch** (Coprincipal Investigator) received a \$35,000 grant from the St. Luke's Episcopal Hospital Roderick D. MacDonald Research Fund for "Development of a Rapid and Reliable Screening Method for Detection of *Klebsiella pneumoniae* Carbapenemase (KPC)-Producing Isolates in SLEH."
- **Angela Kashuba** (Principal Investigator) received the following grants: "ULPC-MS/MS to Support Preclinical and Clinical Pharmacology Studies in HIV Treatment and Prevention" from the Institutional Development Grant Program, North Carolina Biotechnology Center, \$200,000.00. "Preventing HIV Infection in Women: Targeting Antiretrovirals to Mucosal Tissues," U01 AI095031 (NIAID) 8/2011–7/2014, \$2700.00. "UPLC-MS/MS to Support Preclinical and Clinical Antiretroviral Pharmacology Studies." S10 RR026581 (NCRR), 8/2011, \$402,500.

Publications (limited to 3):

Benfield RJ, Hinde GK, Abolnik IZ. Osteomyelitis due to linezolid-resistant *Staphylococcus epidermidis*. Clin Infect Dis 2012 Feb 14. [Epub ahead of print]

Bland CM, Bookstaver PB, Thomas S. Successful rechallenge of daptomycin therapy after initial rhabdomyolysis with co-administration of simvastatin. Int J Antimicrob Agents 2011;38:549–50.

Caudle KE, Inger AG, Butler DR, Rogers PD. Echinocandin use in the neonatal intensive care unit. Ann Pharmacother 2012;46:108–16.

Tillman EM, **Caudle KE.** Training pathways for clinical pharmacy investigators: Pharm.D.-only or Pharm.D./Ph.D.: the trainee's perspective. Pharmacotherapy 2011;31:58e–62e.

Caudle KE, Wiederhold NP, Barker KS, Rogers PD. Genome-wide expression profile analysis of the *Candida glabrata* Pdr1p regulon. Eukaryot Cell 2011;10:373–83.

Forcade NA, **Wiederhold NP**, Ryan L, Talbert RL, **Frei CR**. Antibacterials as adjuncts to incision and drainage for adults with purulent methicillin-resistant *Staphylococcus aureus* (MRSA) skin infections. *Drugs* 2012;72:339–51.

Frei CR, Daniels KR. Potential complications of Medicare reimbursement policy regarding health-care-associated infections. *Am J Health Syst Pharm* 2012;69:190.

Akers KS, Cota JM, **Frei CR**, Chung KK, Mende K, Murray CK. Once-daily amikacin dosing in burn patients treated with continuous venovenous hemofiltration. *Antimicrob Agents Chemother* 2011;55:4639–42.

Attridge RT, **Frei CR**. Health care-associated pneumonia: an evidence-based review. *Am J Med* 2011;124:689–97.

Frei CR, Bell AM, Traugott KA, et al. A clinical pathway for community-acquired pneumonia: an observational cohort study. *BMC Infect Dis* 2011;11:188.

Frei CR, Labreche MJ, Attridge RT. Fluoroquinolones in community-acquired pneumonia: guide to selection and appropriate use. *Drugs* 2011;71:757–70.

Oramasionwu CU, Brown CM, Lawson KA, Ryan L, Skinner J, **Frei CR**. Differences in national antiretroviral prescribing patterns between black and white patients with HIV/AIDS, 1996-2006. *South Med J* 2011;104:794–800.

Oramasionwu CU, Daniels KR, Labreche MJ, Frei CR. The environmental and social influences of HIV/AIDS in sub-Saharan Africa: a focus on rural communities. *Int J Environ Res Public Health* 2011;8:2967–79.

Gallagher JC, MacDougall C. *Antibiotics Simplified*, 2nd ed. Sudbury, MA: Jones & Bartlett Learning, 2012.

Heil E, Daniels L, Walko C, Nicolau D, Smith E. Validation of doripenem dosing in patients with end-stage renal disease receiving hemodialysis. *Ann Pharmacother* 2011;45:1455–6.

Heil E, Corbett A. Guidelines for the use of extended-release nevirapine in HIV-

infected patients. *Expert Opin Pharmacother* 2011;12:2713–8.

Hirsch EB, Cottreau JM, Caeiro JP, Johnson ML, **Tam VH**. Prospective validation of a model to predict mortality following *Pseudomonas aeruginosa* bacteremia. *Diagn Microbiol Infect Dis* 2012;72:97–102.

Hirsch EB, Cottreau JM, Ikwuagwu JO, **Lusardi KT, Mohr JF**, Rodriguez SM, **Shah DN, Tran TT**; on behalf of the Houston Infectious Diseases Network. Significant publications in infectious diseases pharmacotherapy in 2010. *Am J Health Syst Pharm* 2011;68:2075–85.

Hirsch EB, Chang KT, Lasco TM, Caeiro JP, **Tam VH**. Emergence of KPC-producing *Klebsiella pneumoniae* (KPC-Kp) in Texas. *Diagn Microbiol Infect Dis* 2011;69:234–5.

Johnson MD, Plantinga TS, van de Vosse E, Velez Edwards DR, Smith PB, Alexander BD, Yang JC, Laird G, Oosting M, van der Meer J, van Dissel JT, Walsh TJ, Perfect JR, Kullberg BJ, Scott WK, Netea MG. Cytokine gene polymorphisms and the outcome of invasive candidiasis: a prospective cohort study. *Clin Infect Dis* 2012;54:502–10.

Rosentul DC, Plantinga TS, Scott WK, Alexander BD, van de Geer NMD, Perfect JR, Kullberg BJ, **Johnson MD**, Netea MG. The impact of caspase-12 on susceptibility to candidemia. *Eur J Clin Microbiol Infect Dis* 2012;31:277–80.

Plantinga TS, **Johnson MD**, Scott WK, van de Vosse E, Velez Edwards DR, Smith PB, Alexander BD, Yang JC, Kremer D, Laird GM, Oosting M, Joosten LAB, van der Meer JM, van Dissel JT, Walsh TJ, Perfect JR, Kullberg BJ, Netea MG. Toll-like receptor-1 polymorphisms increase susceptibility to candidemia. *J Infect Dis* 2012;205:934–43.

Dodds Ashley ES, Johnson MD. Combination antifungal therapy. In: Kauffman C, Pappas PG, Sobel JD, Dismukes WE, eds. *Essentials of Clinical Mycology*, 2nd ed. New York: Springer, 2011:Part II:153–63.

Adams J, Kashuba ADM. Formulation, pharmacokinetics and pharmacodynamics of topical microbicides. *Best Pract Res Clin Obstet Gynaecol* 2012 Feb 3. [Epub ahead of print]

Kashuba ADM, Patterson KB, Dumond JB, Cohen MS. Pre-exposure prophylaxis for HIV prevention: how to predict success. *Lancet* 2011 Dec 6. [Epub ahead of print]

Patterson KB, Prince HA, Kraft E, Jenkins AJ, Shaheen NJ, Rooney JF, Cohen MS, **Kashuba ADM**. Penetration of tenofovir and emtricitabine in mucosal tissues: implications for prevention of HIV-1 transmission. *Sci Transl Med* 2011;3:112re4.

Veronese F, Anton P, **Fletcher CV**, DeGruttola V, McGowan I, Becker S, Zwierski S, Burns D; Workshop Organizing Committee. Implications of HIV PrEP trials results. *AIDS Res Hum Retroviruses* 2011;27:81–90.

King EA, **McCoy D**, Desai S, Nyirenda T, Bicking K. Vancomycin-resistant enterococcal bacteraemia and daptomycin—are higher doses necessary? *J Antimicrob Chemother* 2011;66:2112–8.

McCoy D, Toussaint K, Gallagher JC. The pharmacist's role in preventing antibiotic resistance. *U S Pharmacist* 2011;36:42–9. Also cited on Medscape Pharmacists – MedPulse Newsletter Top Stories 8/16/2011.

McCoy D, Wong E, **Kuyumjian AG**, **Wynd MA**, Sebti R, Munk GB. Treatment of respiratory syncytial virus infection in adult patients with hematologic malignancies based on an institution-specific guideline. *Transpl Infect Dis* 2011;13:117–21.

Thomas Z, **McCoy D**. Anti-infectives. In: Kane-Gill SL, Dasta J, eds. *High Risk IV Medications in Special Patient Populations*. London: Springer-Verlag, 2011:153–204.

Messina AF, **Namtu K**, Guild M, Dumois JA, Berman DM. Trimethoprim-sulfamethoxazole therapy for children with acute osteomyelitis. *Pediatr Infect Dis J* 2011;30:1019–21.

Snyder AM, Klinker K, Orrick J, et al. In-depth analysis of medication errors in hospitalized patients with HIV. *Ann Pharmacother* 2011;45:459–68.

Stover KR, Riche DM, Gandy CL, Henderson H. What would we do without metronidazole? *Am J Med Sci* 2011 Aug 3. [Epub ahead of print]

Stover KR, Molitorisz S, Swiatlo E, Muzny CA. A fatal case of Kaposi sarcoma due to immune reconstitution inflammatory syndrome. *Am J Med Sci* 2012 Jan 6. [Epub ahead of print]

Phillippe HM, Darling CH, Aikens GB, **Wargo KA**. Development of an antibiogram in a long-term care facility. *Consult Pharm* 2011;26:829–36.

New ACCP Fellows:

Patricia Aubert from Sanford Children's Hospital and Sanford Medical Hospital in Sioux Falls, South Dakota

Other Notable Achievements:

Kurt Wargo received Added Qualifications in ID (AQ-ID).

Eight members became Board Certified Pharmacotherapy Specialists (BCPSs): **Patricia Aubert, John Boreyko, Brian Dial, Michaelia Dunn, Ryan Kuhn, Amy Landers, Yanina Pasikhova, and Sally A. Tice**.

Nephrology PRN

One of the major accomplishments for the PRN in 2011 was the publication of "Comparative Evaluation of the Cockcroft-Gault Equation and the Modification of Diet in Renal Disease (MDRD) Study Equation for Drug Dosing: An Opinion of the Nephrology Practice and Research Network of the American College of Clinical Pharmacy" in the November 2011 issue of *Pharmacotherapy*.

In addition, the PRN offered its first travel award for a trainee to attend the 2011 ACCP Annual Meeting in Pittsburgh, Pennsylvania. The recipient of the travel award was Shailly Shah, a pharmacy student at the University of Pittsburgh. She presented the results of a project she completed with Tom Nolin, Pharm.D., Ph.D., and Karen Nenno, titled "Knowledge, Perceptions, and Adherence of ESRD Patients Receiving Erythropoietic Therapy and Anemia Management: A Student Pharmacist Based Survey in an Outpatient Peritoneal Dialysis Clinic." The paper was presented at the Nephrology PRN business and networking forum held on October 18, 2011, during the ACCP Annual Meeting.

The Nephrology PRN is looking forward to offering a travel award to a student, resident, or fellow attending the 2012 Annual Meeting. Work is also under way within the PRN to develop a mentoring program to connect members who are looking for mentorship in clinical or research arenas with more experienced members.

Publications:

Eyler RF, Mueller BA. Antibiotic dosing in critically ill patients with acute kidney injury. *NatRevNephrol* 2011;7:226–35.

Ghannoum M, **Nolin TD**, Lavergne V, Hoffman RS, Bunchman TE, Burdmann EA, Calello DP, Dalhoff KP, Dargan PI, Goldfarb DS, Jurrlink DN, Kielstein JT, Laliberté M, Lavonas EJ, Li Y, Liu KD, Maclaren R, Mégarbane B, Mowry JB, **Mueller BA**, Roberts DM, Winchester JF. Blood purification in toxicology: nephrology's ugly duckling. *Adv Chronic Kidney Dis* 2011;18:160–6.

Mueller BA, Crompton JA, Donovan BJ, Yankalev S, Lamp KC. Safety of daptomycin in patients receiving hemodialysis. *Pharmacotherapy* 2011;31:665–72.

Mueller BA, Scoville BA. Adding to the armamentarium: antibiotic dosing in extended dialysis. *Clin J Am Soc Nephrol* 2012;7:373–5.

Pasko DA, **Churchwell MD**, Salama NN, **Mueller BA.** Longitudinal hemodiafilter performance in modeled continuous renal replacement therapy. *Blood Purif* 2011;32:82–8.

Pierce DA, Williamson JC, Mauck VS, Russell GB, Palavecino E, Burkart JM. The effect on peritoneal dialysis pathogens of changing topical antibiotic prophylaxis. *Perit Dial Int* 2012 Feb 1. [Epub ahead of print]

Vilay AM, Grio M, DePestel DD, Sowinski KM, Gao L, Heung M, Salama NN, **Mueller BA.** Daptomycin pharmacokinetics in critically ill patients receiving continuous venovenous hemodialysis. *Crit Care Med* 2011;39:19–25.

New ACCP Fellows:

Joanna Hudson, Pharm.D.; Memphis, TN
Thomas Nolin, Pharm.D., Ph.D.; Pittsburgh, PA

Other Notable Achievements:

- Joanna Hudson: Named Fellow of the National Kidney Foundation
- Bruce Mueller: Named Fellow of the National Kidney Foundation
- Wendy St. Peter: Named Fellow of the National Kidney Foundation
- Amy Barton Pai: Appointed to a 3-year term on the Dialysis Advisory Group

Other:

Michael Schwenk presented “Tackling Risks for Cardiovascular Disease, the Pharmacist’s Perspective” at the National Kidney Foundation, Serving Greater New York, Fifth Annual Regional Symposium on Chronic Kidney Disease; March 2012; New York City, NY.

Pain and Palliative Care PRN

Update on Board Certification in Pain and Palliative Care:

The Board of Pharmacy Specialties has collected and analyzed the recent survey to determine whether the knowledge, tasks, and skills identified by the practice analysis task force are actually what a pain and palliative care pharmacist does on a day-to-day basis. We are now waiting on a call for the petition. PRN members can do their part by speaking to ACCP leadership to support the pain and palliative care petition.

Welcome New Members:

- Bernard Cino
- Amanda Clary
- Ryan Costantino
- Matthew Foster
- Kyle Hacker
- Kelly Hoenig
- Lee Hwei Khien
- Farzana Musawwir
- Edith Nutescu
- Michael Smith
- Lee Stringer

Accomplishments:

Nancy Alvarez: Trustee-at-Large candidate for the American Pharmacists Association

Jeffrey Fudin: Director of PGY2 Pharmacy Pain Residency at Stratton VA Medial Center

Rob Hutchison: Board Certification in Ambulatory Care Pharmacy

Mary Lynn McPherson:

- Developed the ASHP Foundation Pain Management Level 1 and 2 Training: Led the effort to develop this online learning experience for pharmacists internationally. Level 1 is 6 modules on basic pain management; level 2 is 10 modules that apply the knowledge taught in level 1.

Hundreds of pharmacists around the world have completed this training.

- University of Maryland, Baltimore, Trailblazer Award. Women's History Month Celebration, University of Maryland School of Pharmacy
- Fellow, American Society of Consultant Pharmacists (ASCP)
- Fellow (inaugural), American Society of Pain Educators (FASPE)
- University of Maryland School of Pharmacy Alumni Association Evander Frank Kelly Honored Alumnus Award
- Fellow, American Society of Pain Educators (FASPE); inaugural selection

Publications:

Jeffrey Fudin

Brennan MJ, Fudin J, Perkins RJ. Opioid Calculator Online. Practical Pain Management (incorporating the "Methadone Fudin Factor"). January 2012. Available at <http://opioidcalculator.practicalpainmanagement.com/>.

Crana S, Fudin J. Drug interactions among HIV patients receiving concurrent antiretroviral and pain therapy. *Pract Pain Manag* 2011;11:105–18,120–4.

Fudin J. Update on Risk Evaluation and Mitigation Strategies (REMS) associated with long-acting opioids. CE program of the University of Connecticut School of Pharmacy and Drug Topics. *Drug Top* 2011 October:45–58.

Fudin J. Opioid pain management: balancing risks and benefits. CE program of the University of Connecticut School of Pharmacy and Drug Topics. *Drug Top* 2011 September:46–58.

Zorn KE, Fudin J. Treatment of neuropathic pain: the role of unique opioid agents. *Pract Pain Manag* 2011;11:26–33.

Mary Lynn McPherson

Kim M, McPherson ML. Pharmacodynamics in the elderly. In: Core Curriculum for the Palliative Long-term Care Nurse. Pittsburgh: Hospice and Palliative Care Nurses Association, 2012.

McPherson ML, Telegadis T. Nonopioid pharmacotherapy of pain in older adults. In: Handbook of Pain Relief in Older Adults: An Evidence-Based Approach, 2nd ed. Totowa, NJ: Humana Press, 2011.

McPherson ML, Telegadis T. Opioid pharmacotherapy of pain in older adults. In: Handbook of Pain Relief in Older Adults: An Evidence-Based Approach, 2nd ed. Totowa, NJ: Humana Press, 2011.

McPherson ML. Frequent pharmacological interactions in palliative care. In: Yennurajalingam S, Bruera E, eds. Oxford American Handbook of Hospice and Palliative Medicine. Oxford University Press.

Uritsky TJ, McPherson ML, Pradel F. Assessment of hospice health professionals' knowledge, views, and experience with medical marijuana. *J Palliat Med* 2011;14:1291–5.

Interviewed for article, What are the best safety practices for use in methadone in the treatment of pain? Conversations with Lynn R. Webster, M.D., and Mary Lynn McPherson, Pharm.D., BCPS, CPE. *Pract Pain Manag* 2012;12:76–8.

McPherson ML. Pain medications increase death rate. *Get Better Health Blog* (getbetterhealth.com); November 2011. Picked up by *The New York Times*.

Invited Presentations:

Jeffrey Fudin

December 9, 2011 – Palliative care: an interdisciplinary symposium. Presented at: The Institute for Continuing Education, The Times Center; New York, NY.

October 17, 2011 – Opioid REMS: helpful or painful? Presented as part of the Pharmaceutical Industry, Hematology/Oncology, and Pain and Palliative Care PRNs' focus session. The role of clinical pharmacists in Risk Evaluation and Mitigation Strategies (REMS) programs. American College of Clinical Pharmacy Annual Meeting, David L. Lawrence Convention Center; Pittsburgh, PA.

October 5, 2011 – New Jersey Dental Surgeons Association. A Continuing Education Lecture Series on Pain Management (4.5 hours) to include pre-emptive analgesia, opioid therapy, risk management, neuropathic pain, and REMS. Presented at: Woodbridge Hilton Hotel; Woodbridge, NJ.

September 27, 2011 – PharmEd presentation (American Health Resources). Current trends in opioid use to manage pain and minimize abuse. Presented at: Doubletree Guest Suites; Mt. Laurel, NJ.

September 18, 2011 – Current trends in opioid use to manage pain and minimize abuse. Presented at: Pain Management Symposium at the Albany College of Pharmacy and Health Sciences; Albany, NY.

July 30, 2011 – PharmEd presentation (American Health Resources). Two sessions: Improving patient care and The role of opioid REMS and current trends in opioid use to manage pain and minimize abuse. Marriott Charleston; Charleston, SC.

June 30, 2011 – Update on opioid therapy: recent trends of use and abuse. Presented at: Pharmaceutical Society of the State of New York (PSSNY) annual convention. Ft. William Henry Hotel; Lake George, NY.

June 7, 2011 – PharmEd presentation (American Health Resources). Current trends in opioid use to manage pain and minimize abuse. Hilton Boston/Woburn Hotel; Woburn, MA.

June 1, 2011 – PharmEd presentation (American Health Resources). Current trends in opioid use to manage pain and minimize abuse. Marriott Buffalo Niagara; Buffalo, NY.

Chris Herndon

McPherson ML, Herndon CM, Kral L. Pathophysiology, pharmacology, and therapeutics: connecting the dots in advanced pain management. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. In: Strickland J, McPherson ML, Herndon C, Dole E. Long-acting opioids: best practice or all hype? Squabbling about pain: current controversies in chronic pain management with opioids. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

Lee Kral

McPherson ML, Herndon CM, Kral L. Pathophysiology, pharmacology, and

therapeutics: connecting the dots in advanced pain management. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

Mary Lynn McPherson

Kim M, McPherson ML, Kopochis E, Weiss S. Impact of an electronic medication reporting program in a hospice organization. Poster presented at: The Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

Kim M, McPherson ML. Medication error reporting in hospice. Poster presented at: The Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

McPherson ML, Watson K, Kendall M, Haines S. Teaching certificate program at the University of Maryland School of Pharmacy. Poster presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

Kim M, McPherson ML. Medication error reporting in hospice. Poster presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

Kim M, McPherson ML, Kopochis E, Weiss S. Impact of an electronic medication reporting program in a hospice organization. Poster presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML, LaPenta M. It's not your mama's end-of-life medication bag! Preconference at: Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

McPherson ML, Davis M, Bruera E, Del Fabbro E. A critical review of evidence-based non-pain symptom management at end of life. Preconference at: Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

Walker K, McPherson ML. Speed dating with pharmacists: 50 practical medication tips at end

of life. Presented at: Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

McPherson ML, Walker K. Stick it to me: topical and transdermal analgesics at end of life. Presented at: Annual Assembly of the American Academy of Hospice and Palliative Medicine & Hospice and Palliative Nurses Association; March 2012; Denver, CO.

McPherson ML. New drugs and drug news of 2011. Presented at: Maryland Pharmacists Association and Maryland ASCP; February 2012; Baltimore, MD.

McPherson ML. Drug selection: differentiating pain medications and utilizing a multimodal treatment approach. In: Holmquist GL, de Leon-Casasola O, McPherson ML, Herndon CM. Patient-Centered Approach to Pain Management: Improving Outcomes One Case at a Time. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. New drugs in pain and palliative care: ambulatory care focus. In: Bickel RJ, McPherson ML, Wheeler RE. Focus on New Drugs in Pain and Palliative Care. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. Pain and palliative care specialist. In: Career Pearls: Days in the Lives of Health-System Pharmacists. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. Getting the word out: being an effective author in the marketplace. In: Professional and Academic Publishing: Putting Your Ideas into Practice. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML, Herndon CM, Kral L. Pathophysiology, pharmacology, and therapeutics: connecting the dots in advanced pain management. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. Long-acting opioids: best practice or all hype? In: Strickland J, McPherson

ML, Herndon C, Dole E. Squabbling About Pain: Current Controversies in Chronic Pain Management with Opioids. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. Opioid treatment agreements in chronic pain management: useful practice or one more piece of paper to file? In: Strickland J, McPherson ML, Herndon C, Dole E. Squabbling About Pain: Current Controversies in Chronic Pain Management with Opioids. 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

McPherson ML. Pain and symptom management. A two-day intensive workshop. Presented at: The Carolinas Center for Hospice & End of Life Care; November 2011; Charlotte, NC.

McPherson ML, Wertheimer D, Shub V, Greenberg-Slovin N. Palliative care: a bridge of compassion between curing and caring. Presented at: The Geriatrics and Gerontology Education and Research Program, University of Maryland School of Pharmacy; October 2011; Baltimore, MD.

Pamela S. Moore

Barnstorming, directing, & producing: integration of a clinical pharmacist across the continuum of palliative care and hospice services. Radwany S, Moore PS. American Academy of Hospice and Palliative Medicine; March 7–10, 2012; Denver, CO.

Richard Wheeler

McPherson ML. New drugs in pain and palliative care: acute care focus. In: Bickel RJ, McPherson ML, Wheeler RE. Focus on New Drugs in Pain and Palliative Care. Presented at: 46th ASHP Midyear Clinical Meeting & Exhibition; December 2011; New Orleans, LA.

Pediatrics PRN

The Pediatrics PRN is pleased to recognize the following accomplishments of its members.

Promotions:

Sarah Smith was promoted to the vice chair of Clinical and Administrative Services at Sullivan University College of Pharmacy.

Awards:

Bradley McCrory received the Patient Education Advocacy Award for the Cincinnati Children's Hospital Medical Center.

Publications:

LaRochelle JM, King A. Avoiding plagiarism [editorial]. *Hosp Pharm J* 2011;46:917–9.

LaRochelle JM, Diaz CJ. Evaluation of pediatric pharmacotherapy education in a college of pharmacy. *Curr Pharm Teach Learn* 2011;3:313–9.

LaRochelle J. Educational interventions to decrease the number of vancomycin levels in a pediatric hospital [letter to the editor]. *Hosp Pharm J* 2011;46:642–3.

LaRochelle J, King A, Tanas M, Day K, Marshall H, Tyler A. Writing a review article. *Am J Health Syst Pharm* 2011;68:790–3.

Messina AF, **Namtu K**, Guild M, Dumois JA, Berman DM. Trimethoprim-sulfamethoxazole therapy for children with acute osteomyelitis. *Pediatr Infect Dis* 2011;30:1019–21.

Broome L, So TY. An evaluation of initial vancomycin dosing in infants, children, and adolescents. *Int J Pediatr* 2011;2011:470364.

Broome L, So TY. Neonatal abstinence syndrome: a review on clonidine's place in therapy. *NeoReviews* 2011;12:e575–e584.

Kautza S, **So TY**. Ceftriaxone-induced hemolysis in pediatric patients with sickle cell disease. *J Pediatr Sci* 2011;3:e83.

Daniels T, **So TY**. Fidaxomicin for the treatment of *Clostridium difficile* infection in the pediatric population – not quite so soon yet. *Gastroenterol Res* 2011;4:93–6.

Wier HA, Cerna A, **So TY**. Rufinamide for pediatric patients with Lennox-Gastaut syndrome: a comprehensive overview. *Paediatr Drugs* 2011;13:97–106.

So TY, Layton JB, **Farrington E**, Gipson PE, Gibson K, Primack W, Conley W III, Gipson DS, Ferris M. Cognitive pharmacy services at a pediatric nephrology and hypertension clinic. *Ren Fail* 2011;33:19–25.

Coulter CJ, **Smith S**. The impact of preclass reading assignments on class performance. *Curr Pharm Teach Learn* 2012. In press.

New ACCP Fellows:

Catherine Crill, **Collin Hovinga**, **Donna Krauss**, and **Jennifer Le** were inducted as new ACCP Fellows at the 2011 Annual Meeting.

Other Notable Achievements:

Bill Greene, chief pharmaceutical officer for St. Jude Children's Research Hospital, provided testimony on drug shortages before the Health Subcommittee of the House Energy and Commerce Committee in February 2012.

**Pharmacokinetics/Pharmacodynamics/
Pharmacogenomics PRN****Notable Member Achievements****Awards:**

Mary Ensom received the 2011 American College of Clinical Pharmacy (ACCP) Education Award "for major contributions to advancing clinical pharmacy education."

Eric Poulin, **Mary Ensom**, Erica Greanya, and Nilu Partovi received the 2011 Publication Award, B.C. Branch (Review Article Category) C.S.H.P., for their paper: Poulin E, Greanya E, Partovi N, Shapiro RJ, Al-Khatib M, Ensom MHH. Development and validation of limited sampling strategies for tacrolimus and mycophenolate in steroid-free renal transplant regimens. *Ther Drug Monit* 2011;33:50–5.

Sarah Stabler and **Mary Ensom** received the 2011 Publication Award, B.C. Branch (Original Research Category) C.S.H.P., for the following paper: Stabler SN, Ensom MHH. Extended-interval aminoglycoside therapy for adult patients with febrile neutropenia: a systematic review. *Can J Hosp Pharm* 2011;64:182–91.

Grants:

Mary Ensom is one of four 2011 Canadian Society of Hospital Pharmacists (CSHP) grant recipients for a project titled "Stability of Propranolol in Extemporaneously Compounded Suspensions: New Formulations for an Old Drug" (\$10,000).

Publications:**Mary Ensom**

Barry AR, **Ensom MHH**. A new analogy for teaching the well-stirred model to pharmacy students. *Int J Pharm Educ Pract (IJPEP)* 2011;7:1–7.

Ensom MHH. Improving the chances of manuscript acceptance: how to address peer reviewers' comments. *Can J Hosp Pharm* 2011;64:389–91.

Zed PJ, **Ensom MHH**, Slavik RS, Brown G, Wilbur K, Kanji S, Koshman S, Irvine-Meek J, Perreault M, Zelenitsky S. Evaluation of the research grant program of the Foundation of the Canadian Society of Hospital Pharmacists, 1995-2008. *Can J Hosp Pharm* 2011;6:399–404.

Wang EH, Mabasa VH, Loh GW, **Ensom MHH**. Haloperidol dosing strategies in the treatment of delirium in the critically-ill. *Neurocrit Care* 2012;16:170–83.

Edwards A, **Ensom MHH**. Pharmacokinetic effects of bariatric surgery. *Ann Pharmacother* 2012;46:130–6.

Su VCH, Harrison J, Rogers C, **Ensom MHH**. Belatacept: a new biologic and its role in kidney transplantation. *Ann Pharmacother* 2012;46:57–67.

Teng JFT, Mabasa VH, **Ensom MHH**. The role of therapeutic drug monitoring of imatinib in chronic myeloid leukemia (CML) and metastatic or unresectable gastrointestinal stromal tumor (GIST) patients. *Ther Drug Monit* 2012;34:85–97.

Greanya E, Poulin E, Partovi N, Shapiro RJ, Al-Khatib M, **Ensom MHH**. Pharmacokinetics of tacrolimus and mycophenolate and its glucuronidated metabolites in stable renal transplant recipients on a steroid-free regimen. *Am J Health Syst Pharm* 2012;68:134–42.

Mah G, Mabasa VH, Chow I, **Ensom MHH**. Evaluating outcomes associated with alternative dosing strategies for piperacillin/tazobactam: a qualitative systematic review. *Ann Pharmacother* 2012;46:265–75.

Phillips JC, Oliffe JL, **Ensom MHH**, Bottorff JL, Bissell LJJ, Boomer J, O'Brien KM, Howard T, Khara M, Bottorff JL. An overlooked majority: HIV-positive gay men who smoke. *J Mens Health* 2012;9:17–24.

Häfeli UO, **Ensom MHH**, Kiang TKL, Stoeber B, Chua B, Pudek M, Schmitt V. Comparison of vancomycin concentrations in blood and interstitial fluid: a possible model for less invasive therapeutic drug monitoring. *Clin Chem Lab Med* 2011;49:2123–5.

Women's Health PRN

The Women's Health PRN has been busy in recent months. PRN activities have included development and dissemination of our PRN newsletter, development of a PRN mission statement, and introduction of plans for increased student involvement within the PRN. In addition, our members have been very productive in their individual practices.

Promotions:

Gerald Briggs, BPharm, FCCP, was appointed as an adjunct professor, Department of Pharmacotherapy, Washington State University, Spokane.

Sarah Shrader, Pharm.D., BCPS, CDE, was appointed as an associate professor in the College of Pharmacy and an adjunct associate professor in the College of Medicine, Department of Clinical Pharmacy and Outcomes Sciences/Family Medicine, South Carolina College of Pharmacy, MUSC Campus.

Karen Whalen, Pharm.D., BCPS, CDE, was appointed as an associate chair of the Department of Pharmacotherapy & Translational Research, College of Pharmacy, University of Florida.

Grants:

Cheang KI. May 1, 2011, to April 30, 2013. "Racial Differences in Insulin Resistance Before and During Pregnancy in Women with the Polycystic Ovary Syndrome." Source: NIH and VCU National Center on Minority Health and Health Disparities; amount: \$68,750; role: Pilot Project Principal Investigator

Cheang KI. July 1, 2011, to June 30, 2013. "Oral Contraceptives, Insulin Resistance and Cardiovascular Risk Profile in African-American vs. Caucasian Women." Source: American Heart Association; amount: \$153,996; role: Principal Investigator

Briggs GG. “Determine the Pharmacokinetics of Targeted Drugs in Breast Milk.” Role: Coprincipal Investigator

Publications:

Ragland D, **Briggs GG, Wasik M,** et al. Obstetrical opportunities: will pharmacy ever realize them? *Ann Pharmacother* 2012;46:297–300.

Briggs GG. Updates: September 2011, December 2011, March 2012 for: Briggs GG, Freeman RK, Yaffe SJ. *Drugs in Pregnancy and Lactation*, 9th ed. Philadelphia: Lippincott Williams & Wilkins, 2011.

Karjane NW, **Cheang KI,** Mandolesi GA, Stovall DW. Persistence with oral contraceptive pills vs. metformin in women with polycystic ovary syndrome. *J Womens Health (Larchmt)* 2012 Feb 10. [Epub ahead of print]

Vinluan CM, Zreikat HH, Levy JR, **Cheang KI.** Comparison of different metabolic syndrome definitions in prediction of future cardiovascular events in the elderly. *Metabolism* 2012;61:302–9.

Essah PA, Arrowood JA, **Cheang KI,** Adawadkar SS, Stovall DW, Nestler JE. Effect of combined metformin and oral contraceptive on metabolic factors and endothelial function in overweight and obese women with polycystic ovary syndrome. *Fertil Steril* 2011;96:501–4.

Cheang KI, Essah PA, Sharma S, Wickham EP, Nestler JE. Divergent effect of a combined hormonal oral contraceptive on metabolic factors in lean versus obese women. *Fertil Steril* 2011;96:353–9.

Cheang KI, Lucidi RS, Baillargeon JP, Essah PA, Nestler JE. Racial difference in insulin resistance between African-American and Caucasian women with polycystic ovary syndrome. In: *Annual Meeting of the American Society for Reproductive Medicine*; October 17, 2011; Orlando, FL. *Fertil Steril* 2011(3 suppl 1):S128–S129. Abstract.

Cheang KI, Arrowood JA, Essah PA, Lucidi RS, Nestler JE. Racial differences in endothelial function between African-American and Caucasian women with PCOS. Poster presented at: 9th Annual Meeting of Androgen Excess & PCOS Society; October 13, 2011; Orlando, FL. Abstract.

Reilly ER, **Cheang KI,** Downs RW Jr, Bachmann LM, Nestler JE. Effect of lowering serum insulin with diazoxide on vitamin D levels in obese women with and without polycystic ovary syndrome. Presented at: American Clinical and Climatological Association Annual Meeting; 2011; Sarasota, FL. Abstract.

McBane S, Painter NA, Lee KC, Ma JD, Bourne PE, Halpert JR, Taylor PW, Kuo GM. Bridging the gap between science and practice through the PharmGenEd™ program [abstract]. *Am J Pharm Educ* 2011;75:Article 105.

McBane S, Painter NA, Lee KC, Ma JD, Bourne PE, Halpert JR, Taylor PW, Kuo GM. Bridging the gap between science and practice through the PharmGenEd™ program. Poster presented at: American Association of Colleges of Pharmacy Annual Meeting; July 2011; San Antonio, TX. Abstract.

Bougetz A, Elder N, Estep G, Kandilian R, Kocher K, Le K, Lew M, Ly T, **McBane S,** Colbert J. How the opening of new schools in California may affect pharmacy manpower. *American Pharmacists Association Annual Meeting*; March 2012; New Orleans, LA. Abstract.

Elder N, Estep G, Kandilian R, Kocher K, Le K, Lew M, Ly T, **McBane S,** Colbert J. How the opening of new schools in California may affect pharmacy manpower. *Drug Top.* February 15, 2012:22–6.

Gleason BL, Peeters MJ, Resman-Targoff BH, Karr S, **McBane S,** Kelley K, Thomas T, Denetclaw T. An active learning strategies primer for achieving ability-based educational outcomes. *Am J Pharm Educ* 2011;75:Article 186.

McBane S. Osteoporosis: a review of current recommendations and emerging treatment options [cover article]. *Formulary* 2011;46:432–46.

McBane S. Drugs in dermatology: spinosad. *J Dermatol Physician Assist.* Winter 2012;6:32.

Thomas T, Karr S, Kelley K, **McBane S.** Overcoming barriers to scholarly activity in a clinical practice setting. *Am J Health Syst Pharm* 2012;69:465–7.

Kee VR, Gilchrist B, Granner MA, Sarrazin NR, Carnahan RM. A systematic review of validated methods for identifying seizures, convulsions, or

epilepsy using administrative and claims data. *Pharmacoepidemiol Drug Saf* 2012;21(suppl 1):183–93.

Carnahan RM, **Kee VR**. A systematic review of validated methods for identifying transfusion-related ABO incompatibility reactions using administrative and claims data. *Pharmacoepidemiol Drug Saf* 2012;21(suppl 1):230–5.

McIntosh J, Tsikitas L, Dennis A. Low-income women's access to contraception after health care reform in Massachusetts: experiences at the pharmacy. *J Am Pharm Assoc*. In press.

Dennis A, Clark J, Córdova D, **McIntosh J**, Edlund K, Wahlin B, Tsikitas L, Blanchard K. Access to contraception after health care reform in Massachusetts: a mixed-methods study investigating benefits and barriers. *Contraception* 2012;85:166–72.

McIntosh J, Rafie S, Wasik M, McBane S, Lodise NM, El-Ibiary SY, Forinash A, Kachlic MD, Rowe E, Besinque K. Oral contraceptives from prescription to over-the-counter status: an opinion statement of the Women's Health Practice and Research Network of the American College of Clinical Pharmacy. *Pharmacotherapy* 2011;31:424–37.

Tocco AM, Chang F, Kleinow ME, Hwang JM, Garwood CL, Khreizat HS, **O'Connell MB**. Classifications of drug-related problems discovered during senior brown bag medication reviews. Presented at: American College of Clinical Pharmacy Annual Meeting; 2011; Pittsburgh, PA. Abstract.

Gupta NA, Chang F, Kleinow ME, Hwang JM, Garwood CL, Khreizat HS, **O'Connell MB**. Patient satisfaction and self-perceived knowledge gained during senior brown bag medication reviews. Presented at: American College of Clinical Pharmacy Annual Meeting; 2011; Pittsburgh, PA. Abstract.

Gupta NA, Chang F, Kleinow ME, Hwang JM, Garwood CL, Khreizat HS, **O'Connell MB**. Evaluation of patient education on preventive health measures and poison control center awareness during senior brown bag medication reviews. Presented at: American College of

Clinical Pharmacy Annual Meeting; 2011; Pittsburgh, PA. Abstract.

Rutkowski KM, Freitel KM, Rosenthal TC, Smith GB, **O'Connell MB**. Experiential value of an older adult medication assessment early in the pharmacy curriculum. Presented at: American College of Clinical Pharmacy Annual Meeting; 2011; Pittsburgh, PA. Abstract.

Breslin TM, Kulik AJ, Bugalski Stutrud CA, Bowers CJ, Smith GB, Mendez J, Afonso NM, Waites CC, **O'Connell MB**. Assessment of student pharmacist learning from a multidisciplinary older adult home visit. Presented at: American College of Clinical Pharmacy Annual Meeting; 2011; Pittsburgh, PA. Abstract.

Mendez J, Alfonso NA, Bruer S, **O'Connell MB**, Bugalski Stutrud C, Bridges PD. Introducing a multidisciplinary house call – the Wayne State university experience. Presented at: American Association of Medical Colleges; 2011; Denver, CO. Abstract.

Alfonso NA, Mendez J, **O'Connell MB**, Bugalski Stutrud C, Smith G, Waites C, Bowers C, Bruer S. Introducing interprofessional education using an older adult home visit. Presented at: Central Group on Educational Affairs; 2012; St. Louis, MO. Abstract.

Waites CC, Bowers C, Mendez J, **O'Connell MB**. Older adult home visiting: preparing students for future workforce roles on multidisciplinary teams. Presented at: Association for Gerontology in Higher Education Annual Meeting; 2012; Arlington, VA. Abstract.

Ali SQ, Spiteri KE, Bugdalski-Stutrud CA, Bowers CJ, Smith GB, Mendez J, Afonso NM, Waites CC, **O'Connell MB**. Contributions to patient care from P3 IPPE students during an interprofessional older adult home visit. Presented at: American Pharmacist Association Annual Meeting; 2012; New Orleans, LA. Abstract.

Rafie S, Choy K. Procedures to improve prescribing and dispensing of oral contraceptives at an academic medical center. *Am J Health Syst Pharm* 2012;69:249–52.

Rafie S, El-Ibiary SY. Student pharmacist perspectives on providing pharmacy-access

hormonal contraception services. *J Am Pharm Assoc* 2011;51:762–5.

Shrader SP, Hall LN, Ragucci KR, Rafie S. Updates in hormonal emergency contraception. *Pharmacotherapy* 2011;31:887–95.

Whalen KL, Rose R. Estradiol valerate/dienogest: a novel oral contraceptive. *Ann Pharmacother* 2011;45:1256–61.

Presentations:

Julie Kelsey, PharmD:

- presented “Drugs in Pregnancy” at the Virginia Health Department Clinician’s Conference
- presented “Hypertension and Contraception” at the Virginia Health Department Clinician’s Conference.

Gerald Briggs, BPharm, FCCP: presented “Perinatal Medications – Effects on the Neonate” to the faculty and students at Showa University, College of Pharmacy, Tokyo.

Other:

Leslie Richard, PharmD:

- evaluated duration for several PSAP modules
- Breakthrough Pain Treatment Pocket Card. Oxford University Press.

Gerald Briggs, BPharm, FCCP: helped initiate an online course in Obstetric Pharmacotherapy. The 2-unit elective course became available in January 2012 to pharmacy students at the College of Pharmacy, Washington State University. In the future, this course will be available to all colleges of pharmacy.

RESEARCH INSTITUTE UPDATE



Oncology Drug Shortage Study Now Recruiting Hematology/Oncology Pharmacists

The ACCP PBRN is proud to announce the launch of the *Oncology Drug Shortage Study* for ACCP PBRN members who specialize in hematology/oncology. The objective of this study is to determine the impact of cytarabine shortage on the timing, dose, or chemotherapy drug regimen selection for adult patients with acute myeloid

leukemia (AML), particularly minority patients with AML, relative to a non-shortage period. Cytarabine is the focus of this research study because shortage of this agent may affect life expectancy, and documented shortage has been widespread.

We invite eligible ACCP PBRN members who practice within the inpatient hematology/oncology specialty area to consider participating in this retrospective data collection research study. The study protocol, central IRB approval letter, data collection tools, and training materials are loaded under step 4 within *PBRNConnect*: <http://www.accpri.org/signin/index.aspx>. This study will use the REDCap Web-based electronic data capture tool. For more information, contact us at pbrn@accp.com.

All ACCP members are welcome to join the ACCP PBRN at no cost. To be eligible to participate in PBRN projects, members must complete online portfolios within *PBRNConnect*. If you are already an ACCP member but have not completed your portfolio within *PBRNConnect*, you may do so at www.accpri.org/signin/index.aspx.

ACCP Research Institute 2012 PRN Report

We want to share with you an update on the activities and success of the Research Institute. Thank you for supporting the ACCP Research Institute.



Join the ACCP PBRN

The ACCP PBRN is a group of clinical pharmacy members from across the United States delivering clinical pharmacy services at a variety of academic, inpatient, outpatient, and other practice settings. Together, this group forms a nationwide network of pharmacists interested in answering research questions. To join the ACCP PBRN, please visit our Web site (www.accpri.org) and complete the online registry form. Once you join the registry, you will need to complete a portfolio with *PBRNConnect* so that you can participate in any PBRN project (www.accpri.org/pbrnconnect).

The ACCP PBRN continues to grow since its launch in February 2009. We have almost 800 members to date, including members who joined through existing PBRNs and whose data appear below. We encourage each of you to join!

ACCP PBRN Members	PRN Code	PRN Name
83	AMED	Adult Medicine
169	AMBU	Ambulatory Care
105	CARD	Cardiology
18	CNSY	Central Nervous System
24	CADM	Clinical Administration
99	CRIT	Critical Care
6	DINF	Drug Information
61	EDTR	Education and Training
19	EMED	Emergency Medicine
30	ENDO	Endocrine and Metabolism
27	GERI	Geriatrics
16	GILN	GI/Liver/Nutrition PRN
13	OCEC	Health Outcomes
48	HMON	Hematology/Oncology
36	IMTR	Immunology/ Transplantation
90	INFD	Infectious Diseases
21	NEPH	Nephrology
28	PAIN	Pain and Palliative Care
41	PEDI	Pediatrics
5	INDU	Pharmaceutical Industry
16	PKDPG	Pharmacokinetics/ Pharmacodynamics/ Pharmacogenomics
19	WOMN	Women's Health

(3/13/2012)

How Do I Join the ACCP PBRN?

The ACCP PBRN has created a one-stop resource for all PBRN-related materials called *PBRNConnect*. Located at www.accpri.org/pbrnconnect, this resource allows ACCP PBRN members to view, print, and download all research and PBRN-related documents. In addition, the *PBRNConnect* will serve as a repository for all PBRN-related training. Each ACCP PBRN member will need to upload his or her own portfolio documents within the secure *PBRNConnect* site to be eligible to participate in ACCP PBRN studies. ACCP PBRN members can access this site using their usual ACCP login. Join the more than 200 PBRN members who already have profiles on *PBRNConnect*.

Generating Bright Ideas

Do you have a bright idea for the next ACCP PBRN project? Join with the ACCP PBRN to complete your project. The ACCP PBRN is committed to supporting the research efforts of its members. We welcome proposals from ACCP PBRN members and other external investigators looking to collaborate with the ACCP PBRN to facilitate practice-based clinical pharmacy research. To learn more about how to collaborate with the ACCP PBRN, please visit www.accpri.org/pbrn/partner.aspx.

Frontiers Fund: Celebrating Success

The Frontiers Fund helped establish the first national clinical pharmacy practice-based research network (PBRN). We recognize the success of the PBRN is made possible in large part by the contributions of several hundred ACCP members and organizations, as well as many PRNs. However, further success cannot be achieved without additional support. Your tax-deductible donation will develop researchers, build the ACCP PBRN, and generate evidence to further document the value of clinical pharmacy services and advance pharmacy research.

The 2012 Frontiers Fund goals are to receive \$100,000 in donations and to increase the percentage of members who donate from 4% to 6%. More information about the Frontiers Fund, including a complete list of donors since 1998, is available at www.accpri.org. Please consider donating to help the Frontiers Fund in 2012 and join the others who have contributed to its success. You can also make online donations at www.accpri.org.

2012 Frontiers Fund Committee: Ron Evens, Susan Fagan (Chair), Stuart Haines, Jimmi Hatton (Chair, Board of Trustees), and Ralph Raasch



ACCP WASHINGTON UPDATE



Report to the U.S. Surgeon General Highlights Pharmacists Delivering Expanded Patient Care Services

The U.S. Public Health Service (USPHS) released a report demonstrating, through evidence-based outcomes, that many expanded pharmacy practice models (implemented in collaboration with physicians or as part of a health team) improve patient and health system outcomes and optimize primary care access and delivery.

Specifically, the report makes the following recommendations:

- Health leadership and policy-makers should further explore ways to optimize the role of pharmacists to deliver a variety of patient-centered care and disease prevention, in collaboration with physicians or as part of the health care team. These collaborative pharmacy practice models can be implemented to manage and prevent disease, improve health care delivery, and address some of the current demands on the health care system.
- Use of pharmacists as an essential part of the health care team to prevent and manage disease in collaboration with other clinicians can improve quality, contain costs, and increase access to care.
- Recognition of pharmacists as health care providers, clinicians, and an essential part of the health care team is appropriate given the level of care they provide in many health care settings.
- Compensation models, reflective of the range of care provided by pharmacists, are needed to sustain these patient-oriented, quality improvement services. This may require further evolution of legislative or policy language and additional payment reform considerations.

The report identified three demands within the health system that pharmacist-delivered patient care can help meet:

- **Chronic Care.** Chronic diseases are the leading causes of death and disability in the United States. Chronic diseases currently affect 45% of the population (133 million Americans); account for 81% of all hospital admissions, 91% of all prescriptions filled, and 76% of physician visits; and continue to grow at dramatic rates. In addition, of all Medicare spending, 99% goes to beneficiaries with chronic disease.
- **Access to Care.** Medically underserved patients seeking a health care home and the growth of primary care visits are two components that lead to insufficient time for focused or comprehensive disease or medication management and other related health care issues.
- **Provider Workforce.** The primary care workforce may be unable to meet the demands of increased access to care. Physician shortages and maldistribution of health care providers affect the way we address this issue. The proportion of newly graduated U.S. medical students who choose primary care as a career has declined by 50% since 1997. Currently, it is estimated that more than 56 million Americans lack adequate access (not coverage) to primary health care because of shortages of primary care physicians in their communities. As millions of new beneficiaries enter the health care system, the situation will most likely worsen.

U.S. Surgeon General Regina Benjamin, M.D., MBA, commended lead author and Assistant Surgeon General RADM Scott Giberson, BSPHarm, PhC, NCPS-PP, MPH, USPHS, and colleagues for their work and expressed her public support for the report.

[Click here](#) to read the report in full.

[Click here](#) to read Dr. Benjamin's letter of endorsement.

Health Reform Implementation Update Supreme Court Review of the Health Care Reform Law

On March 26, the U.S. Supreme Court heard oral arguments on the constitutionality of certain provisions of the Affordable Care Act (ACA). The court is expected to deliver its ruling in June.

The case, brought by [26 states and the National Federation of Independent Business \(NFIB\)](#), focuses specifically on the legality of the individual mandate requiring almost all Americans to purchase health insurance.

Challengers argued that if government could force people to buy health insurance, what could government not force people to buy? However, past Supreme Court cases give Congress broad authority to regulate interstate activities affecting commerce, such as insurance.

The Obama administration has argued that opting not to buy health insurance affects commerce because uninsured people inevitably require health care and raise the costs for everyone.

The law's challengers have argued that if the mandate is found unconstitutional, the entire law should be struck. Other legal experts predict that the court's ruling will be limited to specific provisions around the individual mandate, which in theory would leave the remainder of the law in place.

From a political perspective, however, striking down the mandate would have a significant impact on the process of implementing the law and might undermine public support for the health care reform effort.

[Click here](#) to read more about the upcoming Supreme Court case.

Center for Medicare and Medicaid Innovation Report

The [Center for Medicare and Medicaid Innovation](#) (CMMI) released a report titled "One Year of Innovation: Taking Action to Improve Care and Reduce Costs," detailing 16 initiatives involving more than 50,000 health care providers delivering care to Medicare and Medicaid beneficiaries in all 50 states.

These initiatives are focused on improving patient safety, promoting care that is coordinated across health care settings, investing in primary care transformation, creating new bundled payments for care episodes, and meeting the complex needs of those dually eligible for Medicare and Medicaid.

The release of the report is significant politically, after a [request from three Republican senators](#) – Orrin Hatch (R-UT), Mike Enzi (R-WY),

and Tom Coburn (R-OK) – that the Government Accountability Office investigate CMMI to determine whether it is duplicating work that was already being undertaken by the Centers for Medicare & Medicaid Services (CMS).

[Click here](#) to read the CMMI report.

Pioneer Accountable Care Organization (ACO) Model Initiative Under Way

The CMS Innovation Center announced the launch of the Pioneer ACO Model, designed to support organizations operating as ACOs in providing more coordinated care to beneficiaries at a lower cost to Medicare.

Pioneer ACOs must be responsible for the care of at least 15,000 aligned beneficiaries (5000 for rural ACOs).

Thirty-two organizations were selected to participate in the initiative, which began January 1, 2012. In the first two performance years, the Pioneer Model will test a shared savings and shared losses payment arrangement determined through comparisons against an ACO's benchmark, based on previous CMS expenditures for the group of patients aligned to the Pioneer ACO.

In year 3 of the program, the Pioneer ACOs that have shown savings during the first 2 years will be eligible to move to a population-based payment model. Population-based payment is a per-beneficiary per-month payment amount intended to replace some or all of the ACO's fee-for-service (FFS) payments with a prospective monthly payment.

Beneficiaries receiving care through the Pioneer ACO Model will maintain the full benefits available under traditional Medicare (FFS), as well as the right to receive services from any health care provider accepting Medicare patients.

CMS has established quality measures that will be used to monitor the quality of care provided and beneficiary satisfaction. The agency will publicly report the performance of Pioneer ACOs on quality metrics, including patient experience ratings.

[Click here](#) to read more about the Pioneer ACO Model.

ACCP Political Action Committee (ACCP-PAC) and the 2012 Elections

2012 will be the first election year in which ACCP, through its Political Action Committee (PAC), will provide financial support to help elect candidates to Congress who share our vision for clinical pharmacy in an evolving health care delivery system.

Political contributions, together with direct lobbying and grassroots action, are a necessary tool to help develop relationships with members of Congress and educate them on the role of the clinical pharmacist delivering patient care as part of an interdisciplinary team.

Contributions to the ACCP-PAC will help advance ACCP's long-term goal of targeted Medicare Part B payment reform (and parallel payment reform approaches in the private sector) for clinical pharmacists' services within viable legislative vehicles in current and future Congresses.

ACCP-PAC Fundraising Challenge

The success of the ACCP-PAC depends entirely on the support of ACCP members. Although there are several PACs representing various segments of the pharmacy profession, ACCP has the only PAC dedicated to advancing the practice of clinical pharmacy.

Unlike contributions to the Frontiers Fund, contributions to the ACCP-PAC cannot be accepted from PRNs. All PAC contributions must be made by individuals from personal funds.

With more than 12,000 members eligible to contribute to the PAC, the ACCP-PAC is in a position to become one of the most prominent pharmacy PACs in Washington. To do this, we need the widespread support of our membership.

If each ACCP member contributes just \$25, the ACCP-PAC will raise \$300,000.

ACCP is pleased to report a 100% contribution rate among the Board of Regents and senior-level staff. All ACCP members should consider donating at least \$25 to the ACCP-PAC.

[CLICK HERE](#) to support your PAC today!

ACCP-PAC Governing Council

The ACCP-PAC is directed by the PAC Governing Council, which provides oversight and strategic leadership for the operations of the ACCP-PAC.

The ACCP-PAC Governing Council consists of the following ACCP members:

Chair: Leigh Ann Ross, Pharm.D., BCPS
Treasurer: Gary R. Matzke, Pharm.D., FCP, FCCP, FASN, FNAP
Secretary: Michael S. Maddux, Pharm.D., FCCP
Member: Anna Legreid Dopp, Pharm.D.
Member: Terry Seaton, Pharm.D., FCCP, BCPS (Board of Regents Liaison)

ACCP funds the administrative expenses associated with operating the PAC, so all member contributions go directly to support pro-clinical pharmacy candidates.

2011–12 ACCP-ASHP-VCU Congressional Healthcare Policy Fellow Program

Derrick Griffing, Pharm.D., MPH, of Cicero, Illinois, has been named the 2012–13 ACCP-ASHP-VCU Congressional Healthcare Policy Fellow. The fellow program, now in its sixth year, provides pharmacists with unique insights into health care policy analysis and development under the auspices of the Virginia Commonwealth University (VCU) School of Pharmacy, the American College of Clinical Pharmacy (ACCP), and the American Society of Health-System Pharmacists (ASHP).

Dr. Griffing earned a Pharm.D. degree from Midwestern University School of Pharmacy in 2010 and a master's degree in public health with a concentration in health systems and policy from Johns Hopkins University, Bloomberg School of Public Health, in 2011. He currently practices as an oncology pharmacist at The Johns Hopkins Hospital in Baltimore.

Dr. Griffing will begin his fellowship on September 1. After a structured orientation to Congress from VCU faculty and the Brookings Institute, Griffing will spend 1 month with the ASHP government affairs and policy team and 1 month with the ACCP government and professional affairs staff. In November, he will begin working as a policy fellow on a congressional committee or with the personal staff of a U.S. senator or representative.

About the ACCP-ASHP-VCU Pharmacy Policy Fellow Program

The Fellow program was launched in 2006 under the leadership of Gary R. Matzke, Pharm.D. (VCU

School of Pharmacy), Ed Webb, Pharm.D., MPH (ACCP), and Brian Meyer (ASHP). The program was developed to provide active learning in several policy environments.

The initial month of the program consists of an orientation curriculum put on by the faculty of VCU and the government affairs staff of ACCP and ASHP. Fellows then spend 1 year on Capitol Hill as part of the staff of a congressional committee or the personal staff of a U.S. senator or representative.

The program provides a unique health care policy learning experience that allows the Fellow to make practical contributions to the effective use of scientific and pharmaceutical knowledge in government decision-making.

The Fellow is also expected to undertake a wide array of responsibilities in the congressional office he or she serves, including researching and writing briefs on health care issues; assisting with policy decisions; drafting memoranda; and planning, organizing, and contributing to the management objectives of the office.

Introducing the Pharmacy Healthcare Policy Fellows

2006–2007. The program's inaugural fellow – George Nayarapally, Pharm.D., MPH – worked in the office of the Assistant Secretary for Preparedness and Response (ASPR) within the Department of Health and Human Services (DHHS) for 6 months, followed by almost 6 months in the office of Senator Joseph I. Lieberman (ID-CT).

Dr. Nayarapally went on to serve as a policy scientist in pharmaceutical outcomes research in the Center for Outcomes and Evidence at the Agency for Healthcare Research and Quality (AHRQ) and is currently a pharmacist at the Office of Surveillance and Epidemiology (OSE) within the Center for Drug Evaluation and Research (CDER) at the FDA.

2007–2008. Our second Pharmacy Healthcare Policy Fellow – Anna Legreid Dopp, Pharm.D. – took leave from her position as a clinical assistant professor at the University of Wisconsin School of Pharmacy to move with her husband to Washington, D.C.

Dr. Legreid Dopp also served in the office of Senator Joseph I. Lieberman. Dr. Legreid Dopp returned to Wisconsin and is currently working

as a pharmacy benefit consultant at WEA Trust and a clinical pharmacist at Access Community Health Center. She is working toward a graduate degree in population health sciences, specializing in health services research, from the University of Wisconsin–Madison. In March 2011, Dr. Legreid Dopp became the editor of the *Journal of the Pharmacy Society of Wisconsin*.

2008–2010. Our third Pharmacy Healthcare Policy Fellow – Stephanie Hammonds, Pharm.D. – served on the majority staff of the Senate Health, Education, Labor and Pensions (HELP) Committee under the leadership of Senator Ted Kennedy (D-MA).

Dr. Hammonds was also selected as the 2009–2010 Fellow on the basis of her strong desire to continue her contribution to the health care reform initiatives overseen by the Senate HELP Committee.

After earning her fellowship, Dr. Hammonds joined the Health Resources and Services Administration (HRSA) in the Office of Pharmacy Affairs, where her work focused on the Patient Safety and Clinical Pharmacy Services Collaborative and Affordable Care Act provisions related to the patient-centered health home, care coordination during transitions of care, and clinical pharmacy services.

Dr. Hammonds currently serves as the manager of the Hospital Acute Care Pharmacies for LifeBridge Health in Baltimore, where her work blends policy and practice to develop a new community pharmacy business model.

2010–2011. Joshua P. Lorenz of Columbus, Ohio, was the 2010–2011 Congressional Healthcare Policy Fellow. Dr. Lorenz served as a Health Policy Fellow for the Minority Staff on the U.S. Senate Committee on Health, Education, Labor and Pensions (HELP) under Senator Mike Enzi.

Dr. Lorenz subsequently returned to Ohio, where he currently works as the medical science liaison at AssureRx Health.

2011–2012. Sarah Steinhardt, Pharm.D., J.D., M.S., of Lafayette, Indiana, is currently serving as the 2011–12 Congressional Healthcare Policy Fellow.

Dr. Steinhardt earned her Pharm.D. degree from Purdue University College of Pharmacy in 2003. She also earned a law degree with a health law concentration from the Indiana University

School of Law-Indianapolis in 2009 and a B.S. degree in pharmacy administration from the University of Pittsburgh School of Pharmacy in 2010.

Dr. Steinhardt is currently serving in the office of Senator Ron Wyden (D-OR).

Applications for 2013–2014 Pharmacy Healthcare Policy Fellow Program

Interested candidates should visit the Pharmacy Healthcare Policy Fellow Program's [website](#) for more information and instruction on submitting an application.

Contact ACCP Government Affairs Staff

For more information on any of ACCP's advocacy efforts, please contact:

John K. McGlew
Associate Director, Government Affairs
American College of Clinical Pharmacy
1455 Pennsylvania Avenue NW
Suite 400
Washington, DC 20004-1017
(202) 621-1820
jmcglew@accp.com

PLAN NOW TO ATTEND THE 2012 ACCP ANNUAL MEETING

October 21–24, 2012
Hollywood, Florida



Mark your calendar and make plans to join your colleagues for the 2012 ACCP Annual Meeting, October 21–24, at the Westin Diplomat Resort in Hollywood, one of South Florida's premier beachfront destinations. Hollywood offers meeting attendees a wide array of dining, shopping, and entertainment options at the authentic Hollywood Beach Boardwalk, the eclectic ArtsPark, the exciting Village at Gulfstream Park, and the trendy downtown

district, all within minutes of the Westin Diplomat Resort.

The Annual Meeting provides attendees with world-class educational programming on the most topical issues, exceptional sessions on professional development, and unmatched opportunities for networking. The 2012 Annual Meeting will offer many high-level educational activities in addition to these curricular tracks:

- Expanding the Role of Pharmacists in Ensuring Optimal Health Care Outcomes
- Developing New Corridors to Grow the Future of Pharmacy
- Addressing Controversies in the Management of Chronic Disease

The lineup of educational activities also includes programs within each of the four ACCP Academy Certificate Programs and PRN-developed focus sessions.

The Annual Meeting schedule of events will again include scientific paper platform presentations and poster sessions, the Town Hall meeting, and pharmacy industry forum exhibits. ACCP will also conduct the live rounds of the third annual ACCP Clinical Pharmacy Challenge for students. Registration for the 2012 Annual Meeting, including hotel reservations, will open in June. Watch the ACCP Web site for details. See you in Hollywood!

STUDENT INITIATIVES UPDATE

Student Member Demographics

We thank the many PRN members and liaisons who have encouraged students to consider professional membership in ACCP. Your efforts in reaching out to students have considerably helped expand opportunities for students within the organization. During the past 4 years, the number of ACCP student members has more than tripled, reaching 1850 members as of March 2012.



2012 ACCP Clinical Pharmacy Challenge Registration Now Open

Team registration is now available online. Please note that a current faculty member at the respective institution must initiate all team registrations.

Students interested in forming a team should contact their ACCP [faculty liaison](#). All team registrations must be completed by the deadline of September 4, 2012.

Eligible teams will have the opportunity to compete in up to four online rounds, with the top eight teams advancing to the live quarterfinal competition at the 2012 ACCP Annual Meeting in Hollywood, Florida, this October. Click [here](#) to view a detailed schedule of the 2012 competition.

The ACCP Clinical Pharmacy Challenge is a team-based competition. Teams of three students will compete against teams from other schools and colleges of pharmacy in a “quiz bowl”-type format. Only one team per institution may enter the competition. Institutions with branch campuses, distance satellites, and/or several interested teams are encouraged to hold a local competition. ACCP will provide a written examination that may be used by institutions as a basis for their local competition, if they so desire.

The local competition examination is now available and may be requested by the ACCP Faculty Liaison or the registering faculty member by e-mail. Please address your e-mail request to Michelle Kucera, Pharm.D., BCPS, at mkucera@accp.com. For more information on the local competition, click [here](#).

Each round of the ACCP Clinical Pharmacy Challenge will consist of questions offered in the three distinct segments indicated in the bulleted items below. An expert panel of clinical pharmacy practitioners and educators has developed and reviewed the item content used in each segment.

- Trivia/Lightning
- Clinical Case
- Jeopardy-style

Each team advancing to the quarterfinal round held at the ACCP Annual Meeting will receive three complimentary student full meeting registrations. Each team member will receive an ACCP gift certificate for \$125 and a certificate of recognition. In addition, semifinal teams not advancing to the final round will receive a semifinal team plaque for display at their institution. The second-place team will receive a \$750 cash award (\$250 to each member) and a commemorative team plaque. The winning team will receive a \$1500 cash award (\$500 to each member), and each team member will receive a commemorative plaque. A team trophy will be awarded to the winning institution.

Students are not required to be members of ACCP to participate. Team registration may be submitted online and must be initiated by a current faculty member at the respective institution. Students interested in forming a team should contact their ACCP [faculty liaison](#). If no ACCP Faculty Liaison has been identified, any faculty member from the institution may initiate the registration process. The registering faculty member must confirm the eligibility of all team members and/or alternates online before a team will be permitted to compete. **The deadline to complete your team registration is September 4, 2012.**

ACCP National Student Advisory Committee

Initiated as a working group in 2006, the National Student Advisory Group became a standing committee of the College in 2007 whose members are appointed by the ACCP president-elect. The present 12-member committee serves in an advisory capacity to the ACCP Board of Regents and staff, providing feedback and assistance in developing new programs and services for student members. The current committee’s work has focused on two distinct charges:

1. Update the ACCP Student Membership Brochure; and
2. Increase student awareness, membership, and involvement in the College’s Practice and Research Networks (PRNs).

Applications for the 2010–2011 National Student Advisory Committee Now Open

Please encourage students at your institution who are interested in learning more about clinical pharmacy to apply for appointment to the 2012–2013 National Student Advisory Committee. This is an excellent opportunity for students to enhance their leadership skills, network with students across the country, and interact with clinical pharmacy leaders. Students appointed to the committee will receive a complimentary student meeting registration to attend the 2012 Annual Meeting.

Applicants must submit a current copy of their CV, a 500-word essay detailing their interest in serving on the committee, and a letter of recommendation from an academic dean. Applications are due June 15, 2012. To learn more about the StuNet Advisory Committee or to access the online application portal, please click [here](#).

RESIDENT, FELLOW, AND GRADUATE STUDENT NEWS

National Resident Advisory Committee – Now Accepting Applications for Leadership Roles

The College is currently accepting applications for leadership positions on the 2012–2013 National Resident Advisory Committee. The National Resident Advisory Committee is a working group composed of residents, fellows, or graduate student members appointed annually by the ACCP president-elect. Members serve a 1-year term, and the committee is typically composed of 8–12 members. Appointed leadership positions include chair and vice chair. For additional information on the application process, please visit <http://www.accp.com/membership/rac.aspx>. The deadline for applications is June 15, 2012.

Experts in Training Newsletter – Call for Submissions

All resident, fellow, and graduate student members of ACCP are currently receiving a monthly electronic newsletter titled *Experts in Training*. If there are topics that you would like to see covered in future editions, submit your ideas to Keri Sims, Pharm.D., BCPS, ksims@accp.com.

PRN CONTACT INFORMATION, UPDATED PRN CALENDAR AND HANDBOOK

For more information about a specific PRN, please contact the PRN chair identified below:

Adult Medicine	Nancy Yunker
Ambulatory Care	Candice Garwood
Cardiology	Orly Vardeny
Central Nervous System	Julie Kissack
Clinical Administration	Suzanne Wortman
Critical Care	Jeremy Flynn
Drug Information	Michael Gabay
Education and Training	Maria Pruchnicki
Emergency Medicine	Kevin Rynn
Endocrine and Metabolism	Daniel Riche
Geriatrics	Olga Hilas
GI/Liver/Nutrition	Joseph Ybarra
Health Outcomes	Fred Doloresco
Hematology/Oncology	LeAnn B. Norris
Immunology/ Transplantation	Steven Gabardi
Infectious Diseases	Jason Gallagher
Nephrology	Heather Nyman
Pain and Palliative Care	Richard Wheeler
Pediatrics	Kelly Bobo
Pharmaceutical Industry	Alicia Reese
Pharmacokinetics/ Pharmacodynamics/ Pharmacogenomics	Chee M. Ng
Women's Health	Sarah P. Shrader

[Click here](#) for the 2011–2012 PRN Handbook and calendar information.

PRN MEMBERSHIP TOTALS

Practice and Research Network	Members
Adult Medicine	978
Ambulatory Care	1346
Clinical Administration	330
Cardiology	985
Central Nervous System	176
Critical Care	1670
Drug Information	265
Education and Training	389
Emergency Medicine	376
Endocrine and Metabolism	220
Geriatrics	267
GI/Liver/Nutrition	164
Hematology/Oncology	587
Immunology/Transplantation	356
Pharmaceutical Industry	262
Infectious Diseases	1567
Nephrology	208
Health Outcomes	145
Pain and Palliative Care	293
Pediatrics	612
Pharmacokinetics/ Pharmacodynamics/ Pharmacogenomics	187
Women's Health	178
TOTAL members	11,561